



Deposit Claim Form

RETURN TO:

Ameris Bank
Attn: Deposit Claims
11100 San Jose Blvd.
Jacksonville, FL 32223

The below notification is to inform Ameris Bank that I wish to claim the deposits in the following accounts at Ameris Bank, formerly First Bank of Jacksonville.

Account # _____
Name(s) on Account _____

Signature of Authorized Signer(s) _____

Address _____

Account # _____
Name(s) on Account _____

Signature of Authorized Signer(s) _____

Address _____

Account # _____
Name(s) on Account _____

Signature of Authorized Signer(s) _____

Address _____

