

AUTHORIZATION TO SETUP DIRECT DEPOSIT/AUTOMATIC DEPOSITS

Print and complete a copy of this form, and submit to each depositor with whom you would like to setup direct deposit (ex: payroll, dividends, royalties, etc.)

Please allow sufficient time for change.			
Name on account:			
Social Security Number:			
Address:			
City:	State:	Zip:	
Daytime Telephone Number:			
BB&T ABA Routing Number:			
BB&T Account Number:			
I hereby authorize the deposit of my net payche above. This authorization is to remain in effect erroneously deposited into my account in exce withdrawn without any liability or prior notice.	t until I submit alternate writter	instructions. I agree that a	any funds
I have enclosed a deposit slip/voided check to	verify my new BB&T account	number.	
Signature(s)			
Date			