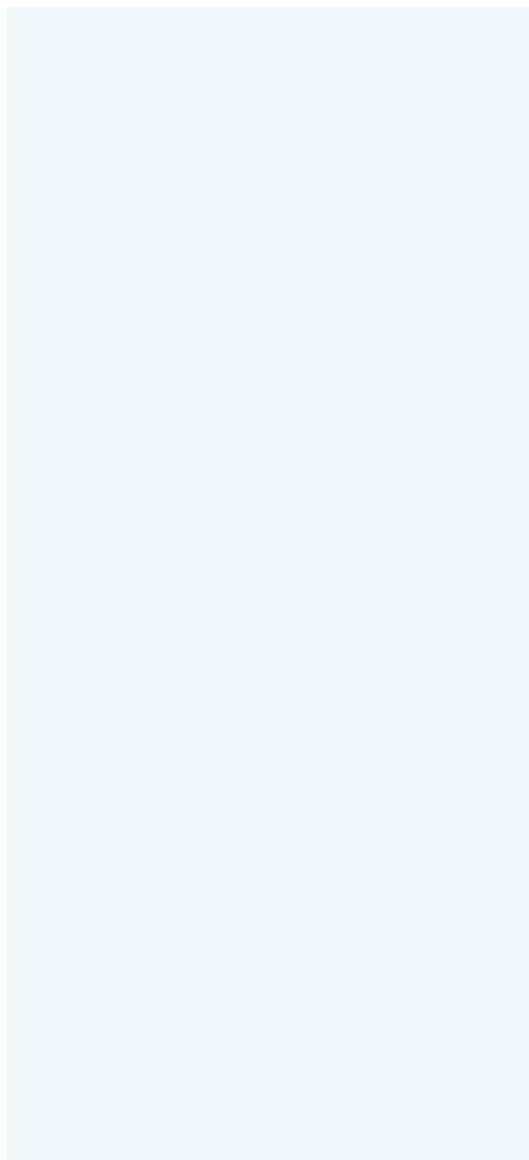


# PAYROLL/DIRECT DEPOSIT AUTHORIZATION FORM

Please print and complete this form for each company with which you have a direct deposit. For your payroll direct deposit, please give this form to your Human Resources department. If you have social security or other governmental direct deposit, please use the Treasury Department, Standard Form 1199A that is included in this packet or pick up a copy at any Community Bank of the Chesapeake Office. For Social Security benefits, you may also contact the Treasury Department at 1-800-772-1213 to make direct deposit arrangements.

Last Name		First Name	
_____			
Street Address			
_____			
City	State	Zip	
_____			
Work Phone		Home Phone	
_____			
Social Security Number			
_____			
Employer's Name		Phone Number	
_____			
Employee ID Number or Department			
_____			

Staple VOIDED check from your new community bank account below:



New Community Bank Account #	Routing Transit #
_____	255072595
Previous Account #	
_____	
Previous Bank Name	
_____	
Type of Account (Check One)	
<input type="checkbox"/> Checking	<input type="checkbox"/> Savings

**CHECK ONE ONLY:**

A new authorization for direct deposit. Not currently using direct deposit.

\_\_\_\_\_

Please change my existing authorization. Transfer automatic payment from my previous bank to Community Bank of the Chesapeake.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Employer Signature \_\_\_\_\_ Date \_\_\_\_\_

You may want to keep your previous account open for two months in order to ensure that all direct deposit transfers are complete.