

TO: The Piedmont Bank 5100 Peachtree Parkway Norcross, GA 30092

I hereby authorize The Piedmont	t Bank to auto debit m	y checking account number		
(checking account number) with	The Piedmont Ba (name of bank)	nk, located at <u>5100 Peachtre</u>	ee Parkway	
Norcross, GA 30092, whose rout (street address, city, state, zip)	ting number is <u>061120</u>	0 <u>851</u> , in		
the amount of \$	These funds should be	e debited on the	_day of each	
month.				
I hereby authorize The Piedmont	t Bank to automatically	y credit the above funds to:		
The Piedmont Bank Loan Number	er:			
Borrower Name:				
Loan Payment Due Date:	Loan Paymer	nt Amount: \$		
This authorization shall remain in Such written cancellation must be checking account and (2) an authorization shall remain in Such written cancellation must be checking account and (2) an authorization shall remain in Such written shall remain shall remain in Such written shall remain shall	e signed by (1) an aut	horized signer on the above		
(Name on Checking Account)				
BY:				
BY:		Printed Name/Title, if	applicable	
Signature of Authorized Signer on Loan		Printed Name/Title, if applicable		
DATE:				
For bank use only: Authorization received by:				
Auto Debit set up by:		Date:	Date:	
Review Billing History – Rebill Ne	eeded? Yes No			