



111 W 16th Avenue, Suite 400
Anchorage, Alaska 99501
T 907.278.3602
Toll Free 800.426.3602
F 907.265.7803
shareholders@bbnc.net

VOID DIRECT DEPOSIT FORM

The following authorization is for (check one)

- Myself
 My Ward

Ward's Name _____
(Only if this authorization is for your ward)

Bank name (old account): _____

Account number (old account): _____

Print Name: _____ Date of Birth: _____

Last 4 digits of SSN: _____ Phone: _____

Please void my direct deposit, and send a paper check to this address:

Mailing Address: _____

Signature: _____

Date: _____

PLEASE NOTE ALL CHANGES **MUST BE SUBMITTED 14 DAY IN ADVANCE OF ANY DIVIDEND DISTRIBUTION.** DIVIDENDS ARE DISTRIBUTED ON THE FIRST FRIDAY OF MARCH, JUNE, SEPTEMBER AND DECEMBER.