

PEOPLES
BANK & TRUST

Hometown Banking @ Home

Name:
Daytime Phone:
Address:
Email Address:
Account Number:
I have read and accept the terms of the Peoples Bank & Trust Hometown Banking @ Home Agreement and wish to enroll.
Signature:
Date:

Print out this form, fill it out and send to:

**Attn: Bill Pay
1899 Buford Hwy
Buford, GA 30518**