

METROPOLITAN INTERPRETERS & TRANSLATORS / METLANG

110 EAST 42ND STREET, SUITE 802, NEW YORK, NY 10017

3450 LAKESIDE DRIVE, SUITE 301, MIRAMAR, FL 33027

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)

Employee Name: _____

Last Four Digits of Social Security #: _____

This direct deposit form is for the following account (check one):

Primary Account: _____ Secondary Deposit Account: _____

If this is for a secondary direct deposit account, I am electing to deposit _____% of my net pay within each payroll period to my secondary direct deposit account.

I hereby authorize Metropolitan Interpreters & Translators/Metlang, hereinafter called COMPANY, to automatically deposit funds to my (check one)

Checking Account: _____ Savings Account: _____

as identified below and the FINANCIAL INSTITUTION named below to accept such deposits initiated by the COMPANY. In the event of an incorrect amount or entry, I authorize the COMPANY to reverse this transaction.

FINANCIAL INSTITUTION: _____

TRANSIT ROUTING/

ABA NUMBER : _____ ACCOUNT NO: _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me or its termination in such time and such manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act upon it or as otherwise provided by law.

DATE: _____ SIGNATURE: _____

Please Attach Original **Voided Check Here**

**IF YOU DO NOT HAVE CHECKS, ATTACH BANK LETTER WITH
ACCOUNT INFORMATION**