

**METLANG**  
1815 Griffin Road, Suite 401  
Dania Beach, FL, 33004

**AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)**

Employee Name: \_\_\_\_\_

Last Four Digits of Social Security #: \_\_\_\_\_

This direct deposit form is for the following account:  
Primary Account: \_\_\_\_\_ Secondary Deposit Acct: \_\_\_\_\_

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 Metlang, hereinafter called COMPANY, to  
automatically deposit funds to my (select 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 THE BANK LETTER WITH ACCOUNT  
Information.**

**Without the Voided Check or Bank Statement, direct deposits cannot be processed.  
Linguists will receive mailed paper checks to address on file.**