

Rapport International

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CONSUMER AUTHORIZATION FOR DIRECT DEPOSIT VIA ACH (ACH CREDIT)

Check all that apply: ☐ Begin Deposit ☐ Change information
I have provided information for my account below.

I (we) hereby authorize Rapport International LLC ("COMPANY") to electronically credit my (our) account as follows. I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Primary Account

Account at the depository financial institution ("DEPOSITORY") named below.

Depository (Bank) Name: _____

Routing Number: _____ Account Number _____

Account Type: (select one) ☐ Checking Account ☐ Savings Account

Name on the Account: _____

Percentage to deposit: _____

Checking Account: PLEASE ATTACH A VOIDED CHECK

I (we) understand that this authorization will remain in full force and effect until I (we) notify COMPANY [Insert manner of revocation, i.e., in writing, address, etc.] that I (we) wish to revoke this authorization.
I (we) understand that COMPANY requires at least [X days/weeks] prior notice in order to cancel this authorization.

Name: _____
(Please Print)

Date: _____ Signature: _____