

# MELROSE RETIREMENT BOARD

CITY OF



MELROSE

## Authorization Agreement for Preauthorized Deposits (ACH Credits)

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Company

Name City of Melrose

Company

ID Number 04-6001401

I authorize City of Melrose, hereinafter called COMPANY, to initiate credit entries and to, if necessary, debit entries and adjustments for any credit entries in error to my CHECKING, SAVINGS account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

Depository

Name (Bank) \_\_\_\_\_ Branch \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Transit/ABA No. \_\_\_\_\_ Account No. \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name \_\_\_\_\_  
Please Print

Employee  
Number N/A  
(optional)

Date \_\_\_\_\_ Signature \_\_\_\_\_

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