

AUTHORIZATION AGREEMENT  
DIRECT PAYMENTS (ACH CREDITS/DEBITS)

I hereby authorize Lee Mechanical Contractors Inc., hereinafter called COMPANY, to debit/credit entries to my account indicated below and the Financial Institution named below, hereinafter called FINANCIAL INSTITUTION, to debit/credit such account. I acknowledge the origination of ACH transactions to my account must comply with the provisions of U.S. law.

_____		_____	
(Financial Institution Name)		(Branch)	
_____			
(Address)		(City-State)	(Zip)
_____		_____	
(Routing/Transit #)	(Account #)	Type of Account __Checking __Savings	

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

_____		_____	
Print Name		Email Address	
_____		_____	
Signature		Date	

**PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM**  
**Direct Deposit is MANDATORY at Lee Mechanical Contractors, Inc.**