



Lawrence Berkeley National Laboratory Office of the Chief Financial Officer One Cyclotron Road, MS: 937-200 Berkeley, CA 94720

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (VIA ACH)

	Date:	□ New □ Change	□ Cancel	
Section 1: Pay	ee Information			
Individual Name: (Last, First, Middle) or Company Name			Employee# (If applicable)	
Physical Street Ad	dress	City	State	Zip Code
Section 2: Ban	ık Information			
credit entries and, below at the depos	if necessary, debit entries and sitory financial institution name	, Lawrence Berkeley National Labora adjustments for any credit entries may be below, hereafter called DEPOSITO of electronic transactions to my (our	de in error to my (our) RY, and to credit and/or	bank account indicated debit the same to such
Bank Name		Address		
City	State	7in Code	Account Type: C	hecking* Saving
ABA#	State	Zip Code Account #		
sign the check. The close this bank acc	nis authorization will remain in	D CHECK pre-printed with your nate of the pre-printed with your nate and different bank account to receive eceiving your payments.	w authorization form mu	ist be completed if you
Section 3: ACI	H Authorization			
☐ LBNL to depos	(Check the appropriate select sit payments via ACH and the a el my ACH payment election.	cions) above name financial institution to cred	lit payments to this acco	unt.
Name(s)	(Please print)	Telephone Number		
Date		Signature		