

CH2M HILL HANFORD GROUP, INC and FLUOR HANFORD INC
 AUTHORIZATION FOR ELECTRONIC FUNDS TRANSFER OF INVOICE PAYMENTS

The information concerning your organization's financial institution will be used to make electronic funds transfer payments on all invoices that are due and approved for payment to the vendor code and vendor legal business name listed below:

Vendor Code: (CHG/FH use only)

Vendor Legal Business Name:		
Address:		
City:	State:	Zip Code +4:
Point of Contact & Telephone No. for Billings and Payments:		

FINANCIAL INSTITUTION INFORMATION CHECKING ACCOUNT ONLY		
Name:	Telephone No:	
Address:		
City:	State:	Zip Code +4:
Nine (9) Digit American Banker's Association (ABA) Identifying Number for Routing the Transfer of Funds:		
Account Name and Account Number to be Credited with Invoice Payments (Please attach deposit slip for account number verification purposes; failure to do so may result in misdirected transfers, for which Vendor will bear such risk):		

VENDOR'S AUTHORIZING OFFICIAL:

_____	_____
Signature	Date
_____	_____
Typed/Printed Name	Telephone

Title	

NOTE: Funds availability for electronic funds transfer payments depends on your financial institution's federal reserve clearinghouse receipt schedule. Transfers to US Bank will be available the same day, transfers to major banks with daily scheduled direct federal reserve clearinghouse receipts will be available the next day and transfers to smaller banks, savings and loan associations and credit unions could take up to two (2) days.

Please return this original, signed form with a copy of deposit slip to: Fluor Hanford Inc.
 ATTN: Accounts Payable, MSIN G1-80
 PO Box 1000
 Richland WA 99352