

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)

Name _____

I (we) hereby authorize EQT Corporation hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) Checking Account/ Savings Account (select one) indicated below at the depository financial institution name below, hereafter called DEPOSITORY, and to credit and/or debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Depository Name _____

City _____ State _____ Zip _____

Routing Number _____ A/C Number _____

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

Name _____ EQT Owner Number _____

Date _____ Signature _____

STAPLE CHECK HERE

John Doe 123 Main Street Anytown, USA	_____ 20 _____	2833
Pay to the order of _____	\$ _____	Dollars
<i>T</i> rust Company Bank Atlanta, Georgia		
MEMO _____		
: xxxxxxxx : xxxxxxx • xxxx		

Routing – Transit No. Personal Account No. Check No.

Please note that one of the following is required to set up your Direct Deposit:

For Deposit into a checking account: Attach a “Voided” check

OR

For Deposit into a savings account: Letterhead from your bank verifying your savings account & routing numbers.