



ACH Authorization Agreement

VENDOR INFORMATION

Vendor Name: _____

Parent/Disregarded Entity Name Per W9 (If Applicable): _____

ACH Contact Name: _____

Telephone Number: _____ Fax Number: _____

E-mail address for remittance advice: _____

Reporting Tax ID Number (Per W9): _____

BANKING INFORMATION

Bank Name: _____

Routing Number: _____ Account Number: _____

Account Type (Checking/Savings): _____

VENDOR AUTHORIZATION

Signature: _____

Print Name: _____ Title: _____

Date: _____ Direct Phone Number: _____

The above named vendor ("Vendor") hereby authorizes Southwestern Energy Company and subsidiaries to make electronic funds transfer (EFT) payments to Vendor's account, as indicated above, for payments of goods and/or services. Vendor acknowledges and agrees that this authorization is provided for the benefit of Southwestern Energy Company and/or its subsidiaries (collectively, "SWN") with respect to all agreements between Vendor and SWN. By the signature of its authorized representative below, Vendor hereby certifies that the representative signing is authorized to execute this ACH Agreement on behalf of Vendor. Facsimile and electronic versions of executed copies of this ACH Agreement shall be binding and enforceable and have the same force and effect as if they were original signatures. Vendor may change any portion of the information provided by giving at least thirty (30) days written notice to SWN at the email address shown below. Vendor understands that SWN may suspend this agreement at any time.

Please return form by e-mail to AccountsPayable@swn.com