

AUTHORIZATION FORM

For Change of Address, direct deposit, or name change, please check all that apply:			
Address Change Change Change of Name Request			
New Direct Deposit Request Change Direct Deposit Cancel Direct Deposit			
Address Information update for Shareholder. Enter Minor's Information if update is for Minor Child			
ID # SSN #	4	Hom	e #
Name	Worl	<#	Cell #
Address	Emai	l	
City	State	Zip Code	
I hereby authorize Old Harbor Native Corporation to initiate credit enteries to my bank account and to initiate if necessary debit enteries and adjustment for any credit enteries made in error to my depository account specified below.(Old Harbor Native Corporation reserves the right to discontinue direct deposit payments at anytime due to system failures or any incidents beyond control of the company.) If any banking information is listed below and you wish to cancel, mark with an "X" across. ***Please attach a voided check for accounting purposes*** Please check one: Checking Savings Bank Account Routing Number Bank/Financial Institution			
Name Change Information update (only complete if name has been changed)			
Previous Name New Name			
Required: Copy of legal document authorizing the name change must accompany this form: i.e., marriage certificate, divorce or adoption decree.			
PLEASE SIGN BELOW: Signature of Shareholder or Custodian for minor child. By my signature, I authorize and request Old Harbor Native Corporation to enter the listed above information into my records. This information will remain in effect until I inform OHNC or cancellation in writing.			
Signature of Shareholder or Custodian		Date signed	
Return To: Old Harbor Native Corporation 2702 Denali Street Suite 100 Anchorage Alaska 99503 Phone: 907.278.6100 For Office Use Only : Date entered By Checked by Date			