



Authorization for Direct Deposit of Sealaska Dividends

Register now on-line at www.mysealaska.com to keep your shareholder banking information up to date and much more.

I hereby authorize SEALASKA to initiate credit entries to my bank account, and to initiate, if necessary debit entries and adjustments for any credit entries in error to my depository account specified below:

SHAREHOLDER INFORMATION				
Name (First, Middle Initial, Last, Suffix)			Last 4 Digits of SSN or Shareholder ID	
Mailing Address	City	State	Zip	New Address? <input type="checkbox"/> Yes <input type="checkbox"/> No


Your Sealaska mail will be sent to the mailing address above and can only be changed by logging in on-line or by written request.

Email Address (Please include your full email address; for example, shareholder@hotmail.com)	Telephone
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If you are a registered user at **MySealaska**, your login email address will be updated to the specified email address above. If changing your email address, you will be prompted to reset your password upon logging in to **MySealaska**.

BANKING INFORMATION				
Bank Name			Branch	
Bank Address	City	State	Zip	New Address <input type="checkbox"/> Yes <input type="checkbox"/> No
Bank Routing Number (MUST BE 9 DIGITS)	Account Number		Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings	

Sealaska will send a "test run" to your banking institution two weeks prior to a distribution. If your account is closed or changes have been made to your account number, a check will be prepared and mailed to the last address on file. You are welcome to attached a voided check or deposit slip up submission showing your name as an account owner.

SIGNATURE	SIGNATURE IS REQUIRED FOR DIRECT DEPOSIT TO BE VALID
<p>*Signature _____ Date _____</p> <p> *By signing above, I accept: Failure to keep my address updated with Sealaska, in which case I understand that direct deposit will be cancelled.</p> <p>My ward, for whom I am custodian: list your ward's full name (First, Middle, Last, Suffix) _____</p>	

If this authorization is for your ward, the ward's name must be reflected as an account owner.

SUBMIT VIA			
Web: login to www.mysealaska.com	Mail: Sealaska Shareholder Relations One Sealaska Plaza Suite 400 Juneau AK 99801	Email: records@sealaska.com	Fax: 1 (907) 586-8191

IMPORTANT NOTE: You can update your banking information on-line by using a **MySealaska** account. Go to www.mysealaska.com to sign in or create an account. Direct deposit forms are also accepted via mail, email, or fax. We do not accept banking changes over the telephone. Questions call 1 (907) 586-9298 or 1 (800) 848-5921.