



Authorization for Direct Deposit of Kootznoowoo, Inc/KPFST Dividends

I hereby authorize Kootznoowoo Incorporated Kootznoowoo, Inc/KPFST to initiate credit entries into my bank account, and if necessary, initiate debit entries and adjustments for any credit entries in error to my depository account indicated below:

Name (First, Middle Initial, Last) _____ Last 4 digits of SSN _____

Mailing Address _____ City _____ State / Zip _____

New Address? Yes No Telephone _____ Email Address _____

***Please attach a voided check or deposit slip on this form and mail to:**

Kootznoowoo, Inc.
8585 Old Dairy Road, Ste. 104
Juneau, Alaska 99801
Attn: Shareholder Services

Bank Name _____ Branch _____ Telephone _____

Account Number _____ Checking Savings Routing Number _____

Mailing Address _____ City _____ State / Zip _____

This authority is to remain in full force until Kootznoowoo, Inc/KPFST has received written notification from me of its termination in such time and in such manner as to afford Kootznoowoo, Inc/KPFST and the about Depository a reasonable opportunity to act on it.

Signature: _____ Date: _____