

AUTOMATIC PAYMENT CHANGE OF INSTRUCTIONS AUTHORIZATION

Date: _____

Company: _____

Address: _____

To Whom It May Concern:

This letter serves as authorization to have my automatic payment switched to come from my account with First Hawaiian Bank.

My information with your Company is as follows:

Name: _____

Account/Policy Number: _____

The automatic payment is currently coming from my account at:

Bank Name: _____

Bank Routing Number: _____

Account Number: _____

Please redirect my payment to come from my account with First Hawaiian Bank as follows:

Bank Routing Number: 121301015 _____

Account Number: _____

Account Type: Checking/MMA Savings

Sincerely,

Signature of Account Holder