



HUNATOTEM CORPORATION

Request for Shareholder Check Reissue

Shareholder Name: _____

Last 4 SSN: _____ Date of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail: _____

I have not received my (mm/dd/yy) _____ distribution, check number _____ . I would like Huna Totem Corporation to reissue the distribution payment as soon as possible and agree to the stop payment fee of \$30, if required.

Checks will not be reissued within the first 30 days of the original check date. Reissued checks are subject to a \$30 stop payment fee if issued within 180 days of the original check date and the check is not in hand.

Shareholder Signature: _____ Date: _____

Mail signed form to: 9301 Glacier Highway, Ste. 200, Juneau, AK 99801 or fax to: (907) 789-1896

For Office Use Only:

Check Number: _____ Check Amount: \$ _____ Number of Shares: _____

(Staff initials and date as appropriate)

_____ Confirm 30 days have passed since original check distribution.

_____ Confirm that check has not cleared bank account.

_____ Stop payment has been executed

_____ Reissued check number: _____