

Change of Address Form

Name _____
Please Print (First Middle Initial. Last)

Social Security Number _____ Birth date _____
mm/dd/yyyy

OLD Address: _____

City _____ State _____ Zip Code _____

NEW Address: _____

City _____ State _____ Zip Code _____

Email: _____ Phone: _____

If you are a custodian for minor children enrolled to Kavilco Incorporated, print their names below as shown on stock certificate(s).

Name _____ Birth date _____
mm/dd/yyyy

Name _____ Birth date _____
mm/dd/yyyy

Please send all future shareholder information to my new address.

Shareholder Signature

Date

Return by:

EMAIL carol.kavilco@gmail.com

- or -

MAIL Kavilco Incorporated
1000 Second Ave, Suite 3320
Seattle, WA 98104

- or -

FAX 206-624-8953 (No cover page required)

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