First National Bank Alaska

Escrow / Collection Instructions - Exhibit A

(Disbursements to payee(s))

Dated:		Account No.:	
		for disbursement, after disbursement to price	
	f any. Funds are dis	bursed by percentage only. The total of all	
percentages must equal 100%.			
Payee(s) Disbursements			·(-) h
Disburse		, payee Checking Savings	e(s), by
mailing cashier's check payable to			,
at			
EFT: Financial Institution			,
Address			
Address For Deposit to: Checking Savings	Account No.:		
		(Please attach a deposit slip, if possible)	
Disburse % to		, payee	e(s), by
depositing to FNBA account #		Checking	
Routing #			
Address For Deposit to: ☐ Checking ☐ Savings	Account No :		
roi Deposit to. Checking Savings	Account No	(Please attach a deposit slip, if possible)	
Diehurse			(a) 1
Disburse		, payee Checking Savings	e(s), by
mailing cashier's check payable to			,
at			,
EFT: Financial Institution			,
Routing #Address			 -
For Deposit to:	Account No.:		
		(Please attach a deposit slip, if possible)	
Disburse % to		, payee	e(s), by
depositing to FNBA account #		Checking Savings	
mailing cashier's check payable to			,
at EFT: Financial Institution			
Routing #			,
Address			
For Deposit to: Checking Savings	Account No.:	(Please attach a deposit slip, if possible)	
		(Trease ander a deposit stip, if possible)	
Consecutive Disbursement Balance Record		Account No.:	
Disburse 8 to 9		, payee, Checking Savings	e(s), by
mailing your cashier's check payable to		Checking [] Savings	
at			
with instructions (if any) to deposit to			,
Routing #			
			,
Address For Deposit to:	Account No.:	(Please attach a deposit slip, if possible)	
		(Please attach a deposit slip, if possible)) of the declining balance thereof has been disb	ouread:
thereafter, disburse the same percentage to	a year (nom	, payee	e(s), by
depositing to FNBA account #		, payee Checking Savings	.,,
mailing your cashier's check payable to			,
at with instructions (if any) to deposit to			,
☐ EFT: Financial Institution			· · · · · · · · · · · · · · · · · · ·
Routing #			
Address For Deposit to: ☐ Checking ☐ Savings	Account No		
roi Deposit to. Checking Savings	Account No	(Please attach a deposit slip, if possible)	
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<u>s\</u>		;\ D	
<u>s</u> \	, Payee	;\ , Pay	yee
<u>s\</u>	, Payee	, Pay	yee
s\ s\	, Payee	, Pay	
<u>s </u>	, Payee	, Pay	

(Terms and conditions stated on the reverse side)

Disbursements will be governed by the rules of the Northwest Clearing House Association then in effect. If a check or other item upon which EFT disbursement was based is not collected, you may recover from the undersigned by an adjusting debit entry, which you are hereby authorized to initiate in accordance with said rules. The undersigned will hold you harmless from, and will defend and indemnify you against, any and every claim or loss that may arise from your complying with this authorization. Acceptance of these instructions by The First National Bank Alaska is subject to acceptance of the EFT disbursement by the receiving financial institution. In accordance with the said rules, The First National Bank Alaska will send a pre-note test to the receiving financial institution, and if such test is accepted, these instructions will be implemented within 20 days of receipt. In the event the receiving financial institution will not accept the pre-note test, and upon notification to the undersigned, alternate written disbursement instructions will be provided Please initial here: Payee ______ Payee _____ Payee _____ Payee _____ For Title Company Use: Prepared by:

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Mailing Address:

Title Company Reference Number: _