

Authorization for Direct Payment

I authorize K-ONI, Inc. dba Kauai Rentals & Real Estate and the financial institution named below to initiate credit entries to my checking/savings account. This authority will remain in effect until K-ONI, Inc. dba Kauai Rentals & Real Estate has received written notification from me to change or cancel such deposits.

Name: _____
(please print)

Mailing Address: _____

e-mail address: _____

phone number: _____

Name of Financial Institution: _____

Address: _____

Financial Institution Routing Number: _____

Account Number: _____

Checking (*please attach a voided check to this form.)

Savings

signature: _____

date: _____