

If you currently receive your distribution through an automated deposit and need to change your deposit information or if you currently do not receive your distribution through an automated deposit and you are interested in this option, please fill out the “Authorization Agreement for Direct Deposit” below and mail 45 days prior to the next dividend distribution date to the name and address indicated on this agreement. [NOTE: Once you are set up for direct deposit, you do not need to complete this form again unless your information changes.]

Partner Name: _____

___ I accept the direct deposit option and have completed the authorization agreement below.

Mail to: Highwoods Properties, Inc.
Attn: Jordan Myers
3100 Smoketree Court
Suite 600
Raleigh, NC 27604

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)

HIGHWOODS REALTY LIMITED PARTNERSHIP

I (we) hereby authorize Highwoods Properties, Inc., hereinafter called COMPANY, to initiate credit entries to my (our) checking savings account (select one) indicated below at the depository named below, hereinafter called DEPOSITORY, to credit the same to such account.

DEPOSITORY NAME: _____ BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

ROUTING NO: _____ ACCOUNT NO: _____
(9th character is check digit)

VOIDED CHECK IS *REQUIRED* FOR DEPOSIT INTO CHECKING ACCOUNT.

DEPOSIT SLIP IS *REQUIRED* FOR DEPOSIT INTO SAVINGS ACCOUNT.

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME(S): _____

ID NO: ____ - ____ - ____ (SSN) **OR** ____ - ____ (FEIN)

DATE: _____ SIGNED: _____

DATE: _____ SIGNED: _____

NOTE: ALL WRITTEN CREDIT AUTHORIZATIONS SHOULD PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.