



Designation of Beneficiary Form

Primary Member Name

Member Social Security Number

Member Number

Joint Owner Name (if applicable)

Joint Owner SSN (if applicable)

Payable on Death Beneficiary Information (Non Joint Owner)

1. This account is a Payable on Death (POD) and is subject to the By-Laws of the Credit Union and applicable federal and state laws and regulations. Ownership of this account cannot be changed by a will.
2. This account belongs to the owner(s) of the account and belongs to the payee(s) upon the death of the owner(s). The payee(s) have no present right of withdrawal.
3. Where there are two or more POD payee(s), the account will belong to the payee(s) who survive the owner(s). Each surviving POD payee(s) will receive an equal share of the account.
4. The owner(s) of this account may change its form by giving notice to the Credit Union in writing.
5. The Credit Union may make payment from this account, including payment of the entire account balance, (i) pursuant to any statutory or common law right of offset, levy, attachment or other valid legal process or court order, relating to the interest of any one or more of the parties.

Beneficiary

Add

Remove

Name _____
First Middle Initial Last

Address _____
Street City State Zip

SSN _____ Birthdate _____ Phone _____

All Accounts

Designated Accounts _____

Beneficiary

Add

Remove

Name _____
First Middle Initial Last

Address _____
Street City State Zip

SSN _____ Birthdate _____ Phone _____

All Accounts

Designated Accounts _____

Primary Member Signature

Joint Owner Signature

Date