

Account Information

Account Owner: _____ Account Number: _____

- All Non-IRA Shares under this account number
- Specific Shares as listed under this account only

Share ID: _____	Share ID: _____	Share ID: _____	Share ID: _____
Share ID: _____	Share ID: _____	Share ID: _____	Share ID: _____

Beneficiary Information

1. Name: _____ Relationship _____

Date of Birth: _____ SSN: _____

Street Address: _____ Apt/Unit# _____

City, State, Zip: _____ Home Ph: _____ Cell Ph: _____

2. Name: _____ Relationship _____

Date of Birth: _____ SSN: _____

Street Address: _____ Apt/Unit# _____

City, State, Zip: _____ Home Ph: _____ Cell Ph: _____

3. Name: _____ Relationship _____

Date of Birth: _____ SSN: _____

Street Address: _____ Apt/Unit# _____

City, State, Zip: _____ Home Ph: _____ Cell Ph: _____

4. Name: _____ Relationship _____

Date of Birth: _____ SSN: _____

Street Address: _____ Apt/Unit# _____

City, State, Zip: _____ Home Ph: _____ Cell Ph: _____

Please use an additional Payable on Death form if more than four beneficiaries are assigned.

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Acknowledgment and Signature

The payable on death designation applies only to the account/share(s) listed on this document and revokes/ replaces any prior payable on death designation. I/We understand that I/We understand that I/We can individually or jointly withdraw the money in these accounts during my/our lifetime. I/We understand that upon death of all account owners these accounts will belong to the named beneficiary(ies), and will not be inherited by my/our heirs, or controlled by will. The provisions set forth in the Membership Agreement with Sharonview Federal Credit Union will govern payment.

Account Owner Signature: _____ Date: _____