

Beneficiary Information

(cannot be a signer on the account)

Please use this form to assign a beneficiary or multiple beneficiaries. If you have multiple accounts, please specify which accounts the beneficiaries apply to.

Member Name: _____ Account #(s): _____

Beneficiary Name: _____ Beneficiary DOB: _____

Beneficiary Contact Information: _____
(Please include phone # and/or email address and/or mailing address)

Beneficiary Name: _____ Beneficiary DOB: _____

Beneficiary Contact Information: _____
(Please include phone # and/or email address and/or mailing address)

If multiple beneficiaries are assigned, will monies be divided equally amongst them? _____

Please list any other special instructions/requests: _____

(Member Signature)

(Date)

(CU Initials)

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