

DESIGNATION OF BENEFICIARY



Credit Union of
Southern California
BUILDING BETTER LIVES®

In the event of my death and all other joint owners predecease me, I hereby designate by signing the bottom of this form the person(s) whose name(s) appears below as my beneficiary to receive any and all amounts in this account.*

Beneficiary (1)

Name _____ Date of Birth _____

Relationship to Member: _____

Address _____ City _____ State _____ Zip Code _____

Beneficiary (2)

Name _____ Date of Birth _____

Relationship to Member: _____

Address _____ City _____ State _____ Zip Code _____

Beneficiary (3)

Name _____ Date of Birth _____

Relationship to Member: _____

Address _____ City _____ State _____ Zip Code _____

Beneficiary (4)

Name _____ Date of Birth _____

Relationship to Member: _____

Address _____ City _____ State _____ Zip Code _____

*If more than one beneficiary is named, amounts will be divided equally among all beneficiaries.

Date

Primary Member Name (please print)

Phone

Joint Owner Name (please print)

Member Number

X

Primary Member Signature

Email

X

Joint Owner Signature

FOR CREDIT UNION USE ONLY

Date received: _____ Completed by: _____ Verification: _____