

Designation of Beneficiary

Use

This form is to be used only when designating "Pay-on-Death" beneficiaries.

This form cannot be used to designate beneficiaries on IRAs, HSAs, or Trust Accounts.

Instructions

Once completed, submit this form one of the following ways:

n Person: Any Patelco Credit Union branch (patelco.org/locations)

By Mail: PO Box 2227, Merced, CA 95344

Patelco Online: Use the Message Center, select "Other Questions"

as the subject, and attach this form

For assistance, please call 800.358.8228 or visit your local branch.

This account or certificate is owned by the named member. Upon the death of the named member, proceeds of this account pass to the named Pay-on-Death beneficiary(ies).

If this account is held in joint tenancy with multiple owners, in the event of death of any named owner, ownership passes to the surviving owner(s). Upon the death of all of the owners, the proceeds of this account pass to the named Pay-on-Death beneficiary(ies).

Name on Account			Member Number
This designation applies to:	Entire account relationship (excOnly the following specified suf	luding any IRA accounts) fixes:	
The following pieces of beneficia	ry information MUST be provided. Lea	ving any field blank will delay pr	ocessing this form.
Name of Beneficiary:		SSN:	
Full Address:		Phone:	
Date of Birth:		ID # (if applicable):	
Relationship:		Share:	%
Name of Beneficiary:		SSN:	
Full Address:		Phone:	
Date of Birth:		ID # (if applicable):	
Relationship:		Share:	%
Name of Beneficiary:		SSN:	
Full Address:		Phone:	
Date of Birth:		ID # (if applicable):	
Relationship:		Share:	%
		TOTAL	%
(Unless y	ou indicate otherwise, funds will be paid	d to beneficiaries in equal shares).	
 Member Signature		Contact Phone	Date
Joint Owner Name	Signature	Contact Phone	Date

Account # Suffix Date