

**BENEFICIARY REQUEST FORM**



Member Number \_\_\_\_\_ Date \_\_\_\_\_

Member Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SSN \_\_\_\_\_ DL# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Number \_\_\_\_\_ Work Number \_\_\_\_\_ Mobile Number \_\_\_\_\_

**BENEFICIARY INFORMATION**

**Beneficiary #1**  Apply to all Shares on the Membership now and in the future  Apply only as defined under SHARE DESIGNATIONS

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Accountholder \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Beneficiary #2**  Apply to all Shares on the Membership now and in the future  Apply only as defined under SHARE DESIGNATIONS

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Accountholder \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Beneficiary #3**  Apply to all Shares on the Membership now and in the future  Apply only as defined under SHARE DESIGNATIONS

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Accountholder \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

**SHARE DESIGNATIONS (Please select/check all intended beneficiaries for each share)**

Share ID _____	Beneficiary 1 <input type="checkbox"/>	Beneficiary 2 <input type="checkbox"/>	Beneficiary 3 <input type="checkbox"/>
Share ID _____	Beneficiary 1 <input type="checkbox"/>	Beneficiary 2 <input type="checkbox"/>	Beneficiary 3 <input type="checkbox"/>
Share ID _____	Beneficiary 1 <input type="checkbox"/>	Beneficiary 2 <input type="checkbox"/>	Beneficiary 3 <input type="checkbox"/>
Share ID _____	Beneficiary 1 <input type="checkbox"/>	Beneficiary 2 <input type="checkbox"/>	Beneficiary 3 <input type="checkbox"/>

I understand and agree that all subsequent beneficiary forms will supersede this document for the purpose of disposing of my accounts at Affinity Plus Federal Credit Union upon my death. Exception to this will be any and all IRA accounts at Affinity Plus Federal Credit Union as IRA requires separate beneficiary designations.

Signature \_\_\_\_\_

Date \_\_\_\_\_

01/2018