



Termination of Joint Account

Instructions:

Complete all fields below and sign this form to remove yourself as a joint owner on the listed membership. The form must be mailed, emailed, faxed, or dropped off at either location for processing. PLEASE NOTE: If the form is not signed in front of a Greater Together CU employee, the form must be notarized.

Please terminate my joint interest in the following membership:

Member Number: _____

Joint Owner's Name: _____

Joint Owner's Signature: _____

Date: _____

GTCU Employee: _____

OFFICE USE ONLY:

Staff: _____ Date Received: _____ Date Completed: _____

State of: _____

County of: _____

On the _____ day of _____ in the year _____, before me, the undersigned notary public, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public

Stamp/Seal