

## Removal of a Joint Owner from an Account

| I hereby request the removal of the name |                                                    | a joint owner                  |
|------------------------------------------|----------------------------------------------------|--------------------------------|
| of account number                        | , currently held in joint                          | t ownership of                 |
| or                                       | or The primary member's date of                    | , SS# on this                  |
|                                          |                                                    | of birth is                    |
| and they are over the age                | of 18.                                             |                                |
| Date:                                    |                                                    |                                |
| Dute                                     |                                                    |                                |
| ~                                        |                                                    |                                |
| Signature                                | Witness                                            | 8                              |
|                                          |                                                    |                                |
| ** Notary                                |                                                    |                                |
|                                          |                                                    |                                |
| T                                        | , hereby agree to and a                            | uthorize the removal of my     |
| name as a joint owner from               | m account number                                   |                                |
| currently held in ownersh                | in of or                                           | or                             |
|                                          | I relinquish all current or fut                    | ure rights or interests that I |
| have or may have had in t                | . I relinquish all current or futu<br>his account. |                                |
|                                          |                                                    |                                |
| Date                                     |                                                    |                                |
|                                          |                                                    |                                |
| Signature                                | Witness                                            | 5                              |
|                                          |                                                    |                                |
| ** Notary                                |                                                    |                                |
| · · Notal y                              |                                                    |                                |
| CC: CARD SERVICES                        |                                                    |                                |
| Date:                                    | Initials:                                          |                                |
| Joint Owner Removed from Deb             |                                                    |                                |
| Comments:                                |                                                    |                                |
|                                          |                                                    |                                |
|                                          |                                                    |                                |
|                                          |                                                    |                                |

**\*\*** If unable to sign this form before a SeaComm Member Service Representative or other representative of SeaComm, please have signature notarized.