

Request to Close Membership: Next of Kin/Personal Representative or Joint Owner

This should form is to be used for individuals who wish to close the memberships of their Next of Kin. A Death Certificate and probate documentation, if required by DCU, must be received by DCU prior to closing the membership. In some instances, additional information may be required by DCU. A copy of the Personal Representative's/Next of Kin's or surviving Joint Owner's photo identification is required with this form for signature verification to close the membership.

(REQUIRED IDENTIFICATION: Individuals that are not currently DCU members must provide current photo identification. We accept the following: US Driver's License • US Social Security Card • Passport • US Military ID • US Work Visa • Other Government Issued picture ID (2nd ID always required).

Please close the following DCU Membe	ership effective immediately.
Membership #	SSN
Prime (Deceased) Owner's Legal Name	(PLEASE PRINT)
Please disburse funds in the account in	the following manner:
☐ Transfer to Membership #	, Account #
Disburse to me in cash (available in-	branch only for amounts < \$500.00)
☐ Send the funds in the form of a bank	check payable to me and mailed to the address on record.
☐ Send the funds in the form of a bank	check payable to me and mailed to the following address:
(PLEASE PRINT)	
the Death Certificate. I certify that I und the above membership in the future, if a	e be made without my having provided you with a certified copy of derstand any items presented against the impacted account(s) of applicable, will be returned or rejected "Account Closed". actions taken by any party because of my having made this request
Personal Representative's/Next of Kin's	s/Joint Owner's Name(PLEASE PRINT)
Cianatura	<u> </u>
Signature	Date
Internal	Use Only - COMPLETE ALL FIELDS
ec'd/ Processed By # Audited	ed By # Method Used to Validate Next of Kin
☐ Verified No Outstanding Loan ☐ Ver	rified No Safe Deposit Boxes