



## DESIGNATION OF PRIMARY AND CONTINGENT BENEFICIARIES

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Member Name

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Member Number & Suffix

The undersigned member of Sun Credit Union designates the following as Primary Beneficiary (Beneficiaries) on said account:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Percent: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Percent: \_\_\_\_\_ Social Security #: \_\_\_\_\_

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The undersigned member of Sun Credit Union designates the following as Contingent Beneficiary (Beneficiaries) on said account.

If Primary and Contingent Beneficiaries are chosen, upon Member's death, the amount in the account shall be payable to the Principal Beneficiary if living, otherwise to the Contingent Beneficiary.

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Percent: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Percent: \_\_\_\_\_ Social Security #: \_\_\_\_\_

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Member Signature

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Date