

Member Number	Effective Date
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Member/Account Name			
Physical Address	City	State	Zip
Mailing Address (if different)	City	State	Zip
Home Phone	Mobile Phone	Email Address	

Joint Owner #1 Name	Email Address	SS#	DOB	Driver's License #/State
Street	City	State	Zip	Employer
Joint Owner #2 Name	Email Address	SS#	DOB	Driver's License #/State
Street	City	State	Zip	Employer

Account Beneficiary Designation – This form will revoke all prior death Beneficiary designations by you. Maximum of four (4) Beneficiaries per account.

Beneficiary Name	Address	DOB	SS#	Mobile Phone	Percentage
Beneficiary Name	Address	DOB	SS#	Mobile Phone	Percentage
Beneficiary Name	Address	DOB	SS#	Mobile Phone	Percentage
Beneficiary Name	Address	DOB	SS#	Mobile Phone	Percentage

If you are choosing a Trust or Estate to be the Beneficiary, you may choose one (1) Trust or one (1) Estate as a designated Beneficiary.

Name of Trust Agreement or Estate (as applicable)	Name of Successor Trustee of Trust or Personal Representative of Estate	Address of Successor Trustee or Personal Representative (as applicable)	Tax ID # of Trust Agreement	Mobile Phone
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Disclosure Agreement, Survivorship Designation and Acknowledgement

This request will affect all share accounts (suffixes) which are associated with this account, EXCEPT for loan suffixes and IRA accounts. IRA accounts require a separate beneficiary designation form which is specific to the IRA.

Upon the death of all owners, the account(s) will only be paid to the Beneficiaries designated on this form. If multiple Beneficiaries are designated and a percentage is not stated, funds will be divided equally between all Beneficiaries.

You should consult your legal or tax advisor to determine whether a POD designation is appropriate for our specific situation. By accepting a Beneficiary designation of record, Nymeo will not assume and will have no responsibility or liability with respect to the legal or tax consequences of the designation, including but not limited to the impact on the designation of community property or laws governing inheritance of property.

By signing this document, my joint members(s), if any, and I/we agree to abide by the disclosed terms and conditions of all accounts or services that I/we receive at Nymeo and the terms and provisions of the Membership and Account Agreement. The survivorship designation on my primary savings account applies to all other joint accounts with the same joint member unless specifically designated otherwise for a particular account. All joint account members/signers are considered equal owners and joint tenants with the right of survivorship. These Beneficiary designations will only apply when all members on an account are deceased.

Security Interest: I/We acknowledge and pledge to Nymeo a statutory lien in my/our shares and dividends on deposit in all joint and individual accounts as well as on all of pay on death Beneficiary designations, and any monies held by Nymeo now and in the future to the extent of any loan made and any charges payable to Nymeo. The statutory lien does not apply to shares in any Individual Retirement Account.

Signatures

By signing, I/we acknowledge I/we have read and agree to the information/Disclosure above and consent to adding the Beneficiaries designated herein to the account.	
Member(s) Signature	Date
Joint Owner (1) Signature	Date
Joint Owner (2) Signature	Date

A notary is required for each Nymeo Member signing this form if this form is not signed in the presence of Nymeo staff.

State of _____
County of _____

I HEREBY CERTIFY that on this ____ day of _____, before me, the Subscriber, a Notary Public in and for the State and County aforesaid, personally appeared _____ and they did acknowledge the foregoing to be their act and deed.

WITNESS my hand and Notarial Seal.

Notary Public

My commission expires: