



# Payable on Death Designation

Go Energy Financial  
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New Designation

Change Designation

Account: Checking/Savings

CD

**Name of Account Owner(s):** List all owners names

Name of 1<sup>st</sup> Owner:

Name of 2<sup>nd</sup> Owner:

Name of 3<sup>rd</sup> Owner:

**Agreement:** If there is an existing Signature Card or other document that pre-dates this Designation that sets forth any POD designations as to the specific accounts listed herein, this Designation shall govern and prior POD instructions are revoked. In addition to the terms and conditions in the account agreements governing our relationship the undersigned agree as follows:

I/we hereby request a Payable on Death (POD) designation for the beneficiary(ies) listed for the account(s) designated in this Designation, and I/we agree to the terms on this form. It is understood and agreed that subject to the credit union's bylaws and applicable state and federal laws, rules, and regulations, all sums paid into the account(s) may be pledged to the credit union as security for a loan by me; and further that all account funds may be withdrawn in whole or in part by any authorized user prior to death. Upon the death of all account owners, funds in the account(s) shall be made payable and distributed to the surviving beneficiary, or if more than one beneficiary, to the surviving beneficiaries equally, unless a percentage designation is indicated. If a Legal Trust is the named beneficiary, this designation shall supersede any individually named beneficiary(ies) and payment will be made in full to the Legal Trust.

I/we understand and agree that I/we am/are responsible for properly designating the respective percentage shares for the respective beneficiaries so that the total percentage equals 100%. If there is a discrepancy in the percentage shares and the total does not equal 100%, then I/we agree that the designation shall automatically be determined for the surviving beneficiaries to share the distribution equally.

*If you do not provide sufficient information below for us to identify the beneficiary, the Credit Union will not have any obligation or liability for non-payment of the funds upon the owner's death; and/or may issue such requirements before making payment as the Credit Union deems necessary for compliance with applicable laws and Credit Union procedures.*

Beneficiary(ies) may be changed at any time  
by submitting a new POD Designation form signed by all owners, as applicable, to be effective.

**Designated Account(s) – List Member Number(s) Below:** Only member numbers listed below will be subject to this Designation. DO NOT list any IRA Account. Any designation of an IRA Account will be disregarded pursuant to applicable federal laws.

Member Number:

Member Number:

Member Number:

Member Number:

**Beneficiary Information** -- Choose either a named beneficiary OR a Legal Trust.

A Legal Trust designation shall supersede any named individual beneficiary(ies) and will always be 100%.

NAME (First, Middle and Last)	Social Security Number or Other Tax ID Number	Date of Birth	Percentage (must equal 100%)

Signature:

Date: