

| To: | WESTERN SUN FEDERAL CREDIT UNION | | | | |
|------------------|----------------------------------|-----|-------------|--|--|
| | | | No | I understand I will no and this account must be in a y name to be removed. | |
| | | | (Signature) | | |
| | | | (Pri | (Print Name) | |
| | | | (Date) | (SSN) | |
| Date: | | | | | |
| Notariz | zed By: | | | | |
| Commi Expires | | | | | |
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| FOR OF | FFICE USE ONLY: | | | | |
| | | By: | Date: | | |
| | eement Closed: | | | | |