

Termination of Joint Account

Date: _____

This is to notify Niagara Regional F	CU that I wish to termi	inate my joint interest in
Account Number:		<u> </u>
Joint Owner's Signature:		
Identification Provided:		
State of		
County of		
of	-	SS:, in the year two thousand,
On this	_ day of	, in the year two thousand,
before me the subscriber appeared		to me personally known to be the trument, and he/she executed the same.
Notary Public	OR	NRFCU Employee
Notary Stamp:		
	Internal Us	se Only
Initials:		
Date Completed:		
Comments:		