



TERMINATION OF JOINT ACCOUNT

This is to notify The Summit Federal Credit Union that I wish to terminate my joint interest in Account # _____.

Joint Owner's Signature: _____

Joint Owner's Identification Provided: _____

Dated: _____

State of New York

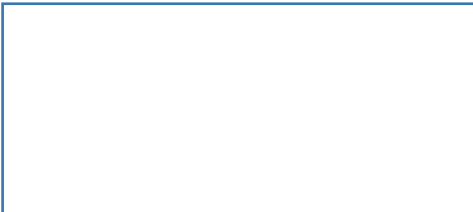
County of _____

_____ of _____

SS: _____

On this _____ day of _____, in the year two thousand _____, before me the subscriber appeared _____ to me personally known to be the same person described in and who executed foregoing instrument, and he executed the same.

Notary Public OR _____
Summit Employee

Notary Stamp: 

Internal Use Only:

Teller Number and initials of individuals completing file maintenance: _____

Date account file maintenance completed: _____