



# ACCOUNT UPDATE FORM

## Add or Delete • Joint Owner(s)

<b>OWNER INFO</b>	PRIMARY OWNER'S NAME	ACCOUNT NUMBER(S)	
	STREET ADDRESS	HOME PHONE	
	CITY, STATE, ZIP	WORK PHONE	CELL PHONE

**ADD A JOINT OWNER**  
 WE REQUEST THAT THE FOLLOWING PERSON BE ADDED TO THE CREDIT UNION SAVINGS ACCOUNT(S), CERTIFICATE ACCOUNT(S), AND CHECKING ACCOUNT(S) LISTED ABOVE AS A JOINT OWNER. **PLEASE NOTE THIS DOES NOT APPLY TO TRUST ACCOUNTS OR INDIVIDUAL RETIREMENT ACCOUNTS (IRA).** PLEASE SUBMIT A COPY OF THE JOINT OWNER'S IDENTIFICATION.

**SIGNATURE CARD/ACCOUNT AGREEMENT**  
 I/WE AGREE THAT THE CHANGES ON THIS FORM AMEND THE PREVIOUSLY SIGNED MEMBERSHIP APPLICATION AND AGREE TO THE BYLAWS, AS AMENDED, OF AMERICAN FIRST CREDIT UNION (THE "CREDIT UNION"). I/WE CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT. MY/OUR SIGNATURE ON THIS FORM APPLIES TO SUB ACCOUNTS UNDER MY/OUR ACCOUNT AT THE CREDIT UNION AND CONSTITUTES A REQUEST FOR ANY IDENTIFYING NUMBER AND/OR ACCESS DEVICE ISSUED BY THE CREDIT UNION IN CONNECTION WITH SUCH ACCOUNTS. I/WE ALSO AGREE TO BE BOUND TO THE TERMS AND CONDITIONS OF ANY ACCOUNT THAT I/WE HAVE IN THIS CREDIT UNION NOW OR IN THE FUTURE. I/WE ACKNOWLEDGE RECEIPT OF THE "ABOUT YOUR CREDIT UNION ACCOUNTS" AGREEMENT AND DISCLOSURE AND, IF APPLICABLE, W-9 INSTRUCTION. UNDER PENALTIES OF PERJURY, I CERTIFY THAT: (1) THE NUMBER SHOWN ON THIS FORM IS MY CORRECT TAXPAYER IDENTIFICATION NUMBER; (2) I AM NOT SUBJECT TO BACKUP WITHHOLDING BECAUSE: (A) I AM EXEMPT FROM BACKUP WITHHOLDING, OR (B) I HAVE NOT BEEN NOTIFIED BY THE INTERNAL REVENUE SERVICE (IRS) THAT I AM SUBJECT TO BACKUP WITHHOLDING AS A RESULT OF A FAILURE TO REPORT ALL INTEREST OR DIVIDENDS, OR (C) THE IRS HAS NOTIFIED ME THAT I AM NO LONGER SUBJECT TO BACKUP WITHHOLDING; AND (3) I AM A U.S. PERSON (INCLUDING U.S. RESIDENT ALIEN). INSTRUCTIONS: CROSS OUT ITEM 2 ABOVE IF YOU HAVE BEEN NOTIFIED BY THE IRS THAT YOU ARE CURRENTLY SUBJECT TO BACKUP WITHHOLDING BECAUSE YOU HAVE FAILED TO REPORT ALL YOUR INTEREST AND DIVIDENDS ON YOUR TAX RETURN. CROSS OUT ITEM 3 AND COMPLETE A W-8BEN IF YOU ARE NOT A U.S. PERSON.

NAME \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_  
 BIRTH DATE \_\_\_\_\_ DRIVER'S LICENSE \_\_\_\_\_ STATE OF ISSUANCE \_\_\_\_\_ EXP DATE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ MMN \_\_\_\_\_  
 EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_ HIRE DATE \_\_\_\_\_

**IMPORTANT INFORMATION:** TO HELP THE GOVERNMENT FIGHT THE FUNDING OF TERRORISM AND MONEY LAUNDERING ACTIVITIES, FEDERAL LAW REQUIRES ALL FINANCIAL INSTITUTIONS TO OBTAIN, VERIFY, AND RECORD INFORMATION THAT IDENTIFIES EACH PERSON WHO OPENS AN ACCOUNT. **WHAT THIS MEANS FOR YOU:** WHEN YOU OPEN OR ARE ADDED TO AN ACCOUNT, WE WILL ASK FOR YOUR NAME, ADDRESS, DATE OF BIRTH, AND OTHER INFORMATION THAT WILL ALLOW US TO IDENTIFY YOU. WE MAY ALSO ASK TO SEE YOUR DRIVER'S LICENSE OR OTHER IDENTIFYING DOCUMENTS. BY SUBMITTING THIS APPLICATION, YOU AUTHORIZE THE CREDIT UNION TO OBTAIN INFORMATION NECESSARY TO VERIFY YOUR IDENTITY. THIS MAY INCLUDE INFORMATION OBTAINED FROM CONSUMER REPORTING AGENCIES, PUBLIC DATABASES, OR OTHER SOURCES. IF THE CREDIT UNION IS UNABLE TO VERIFY INFORMATION YOU PROVIDE, AN ACCOUNT MAY NOT BE OPENED, OR YOU MAY NOT BE ADDED. THE CREDIT UNION RESERVES THE RIGHT TO CLOSE YOUR ACCOUNT IF IT DETERMINES AT A LATER DATE THAT IT DOES NOT KNOW YOUR TRUE IDENTITY.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
ADDED JOINT OWNER SIGNATURE MM / DD / YYYY

**DELETE A JOINT OWNER**  
 REMOVAL OF A JOINT ACCOUNT OWNER REQUIRES CONSENT OF THE JOINT OWNER WISHING TO BE REMOVED. THE REMOVED JOINT OWNER RELINQUISHES OWNERSHIP INTEREST INCLUDING ANY MEMBERSHIP SHARE IN THE ACCOUNT(S) DESIGNATED ABOVE. THIS RELINQUISHMENT DOES NOT AFFECT YOUR OBLIGATION ON ANY LOAN ACCOUNT(S), AND DOES NOT APPLY TO TRUST OR IRA ACCOUNTS.

I REQUEST THAT MY NAME BE REMOVED FROM THE CREDIT UNION SAVINGS ACCOUNT(S), CERTIFICATE ACCOUNT(S), AND CHECKING ACCOUNT(S) LISTED ABOVE:

NAME \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_  
 BIRTH DATE \_\_\_\_\_ DRIVER'S LICENSE \_\_\_\_\_ STATE OF ISSUANCE \_\_\_\_\_ EXP DATE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_ MMN \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
DELETED JOINT OWNER SIGNATURE MM / DD / YYYY

**I AUTHORIZE AMERICAN FIRST CREDIT UNION TO ACT IN ACCORDANCE WITH ALL INSTRUCTIONS SET FORTH ABOVE.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
PRIMARY OWNER SIGNATURE MM / DD / YYYY

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
JOINT OWNER SIGNATURE MM / DD / YYYY

Send to American First CU, 6 Pointe Drive Ste 400, Brea, CA 92821-6322 or FAX to 562.237.5111, or simply return to an American First Credit Union Branch

**FOR OFFICE USE ONLY:**

Processed by \_\_\_\_\_ on \_\_\_\_\_  
ASSOCIATE NAME MM / DD / YYYY

ChexSystems Clr  Yes  No  
 OFAC Cleared  Yes  No  
 Audited By \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS FOR COMPLETING THE ATTACHED FORM

INSTRUCTIONS FOR COMPLETING THE ATTACHED  
FORM

The **OWNER INFO** and **AUTHORIZATION** sections are required with each request. You need only complete other sections relevant to your change request. Thank you for printing clearly. Use this form to add a joint owner, or to delete a joint owner from your account. Please make sure to fill out the appropriate sections so changes can be made correctly, sign and return your form and any supporting documents to: American First Credit Union, 6 Pointe Drive Ste 400, Brea, CA 92821-6322. You may also visit one of our branches to submit your form, or FAX it to 562.237.5111.

**OWNER INFO** – This section is required, and should be completed by the primary account owner. Complete this owner identification section in its entirety, please. If your changes affect multiple accounts, please separate each account number with a semi-colon (;)

**ADDING JOINT OWNER(S) TO ACCOUNT** – This section will be completed if you are adding a new joint owner to your American First savings, certificate, and checking account(s). Please complete this section in its entirety, including the new joint owner's signature. Please include a copy of the new joint owner's identification. The Primary account owner and all current joint owners must sign the authorization section located at the bottom of the change form. **Please note this agreement does not apply to Trust Accounts or Individual Retirement Accounts (IRA); those account types are not covered under the attached agreement.**

**DELETING JOINT OWNER(S) FROM ACCOUNT** – This section will be completed if you are deleting one or more joint owners from your American First savings, certificate and checking account(s). Please complete this section in its entirety. The account owner being removed must agree and sign this section. This agreement does not remove owner from any loan agreement previously signed or affect the obligation on any loan account(s). This agreement does not pertain to Trust or IRA accounts.

**AUTHORIZATION** – This section is required for any and all account changes, and must be signed by the primary account owner and all joint account owners as specified in each section. If there are more than two account owners on the account, please have the additional owner(s) sign the reverse side of the request form, or attach their signed authorization on a separate account update form.