

Please complete this form to designate a POD Beneficiary or Beneficiaries on your account. This designation only applies to the account listed below. Please submit a separate form for each account you own at Old Glory Bank. This form may be used for all account types except for Business or Trust accounts.

PART ONE: ACCOUNT INFORMATION

Account Owner Information			
Primary Account Owner's full no	ame		
Joint Account Owner's full nam	e, if applicable		
Email address on account reco	rd		
Account Information			
Select the account type:	 Spending 	• Savings	
Account Number			
ACCOUNTINUTIDE			

PART TWO: POD INFORMATION

I/We designate the following one or more individuals as POD Beneficiary(ies) of the above-referenced account, subject to the POD Designation Terms and Conditions set forth below and applicable state law. Each POD Beneficiary(ies) must be an individual person. All information must be completed for each POD Beneficiary you designate.

POD Beneficiary #1

First Name	Middle Name	Last Name
Date of Birth	Social Security Numb	er
Principle Residence Addre	ss (no P.O. Box)	
City	State	Zip
Relationship to Account O	wner	Phone Number





POD Beneficiary #2			
First Name	Middle Name	Last Name	
Date of Birth	Social Security Number		
Drive into Desirton a Antonom	(D O D)		
Principle Residence Address	(no P.O. Box)		
0''			
City	State	Zip	
Relationship to Account Own	ner	Phone Number	
POD Beneficiary #3			
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First Name	Middle Name	Last Name	
Date of Birth	Social Security Number		
Principle Residence Address	(no P.O. Box)		
City	State	Zip	
Relationship to Account Owner		Phone Number	
POD Beneficiary #4			
First Name	Middle Name	Last Name	
Date of Birth	Social Security Number		
Principle Residence Address	Ino P O Royl		
Timelpio Residence Address	(1.0 r 1.0 r 1.0 r)		
City	State	 Zip	
,		P	
Relationship to Account Own	ner	Phone Number	





PART 3: POD DESIGNATION TERMS AND CONDITIONS

A Payable on Death (POD) account is an informal revocable trust account owned by one or more people expressing the intent that upon the death of the owner(s), the deposited funds will pass to one or more named beneficiaries. A revocable trust account can be revoked, terminated, or amended at the discretion of the owner(s).

Upon the death of the sole account owner on an individual account, or the last account owner on a joint account:

- A. Any funds remaining in the account referenced above belong to the POD Beneficiary or Beneficiaries, if both surviving, or to the survivor of them if one or more dies before the death of the sole Account Owner or the last surviving Account Owner;
- B. If two or more POD Beneficiaries survive, any funds remaining on deposit belong to them in equal shares, subject to applicable law; and
- C. If two or more POD Beneficiaries survive, there is no right of survivorship in the event of death of a POD Beneficiary.

Payment of the funds to any POD Beneficiary is subject to Old Glory Bank's (Bank) right to charge the account for any amount the deceased Account Owner(s) or POD Beneficiary owes the Bank. The Bank may require the submission of specific legal documents (such as a death certificate and/or POD Beneficiary ID information) prior to the release of funds in the account. Until final payment is made to the POD Beneficiary or Beneficiaries, the Bank shall continue to operate the account according to the terms of the applicable Account Agreement and disclosures, and these POD Designation Terms and Conditions. The terms of the account may not be altered by Will or other testamentary instrument. Certain state law restrictions apply to payable-on-death accounts. You are solely responsible for complying with applicable law in establishing a payable-on-death account. The Bank makes no representation that designating your account as a payable-on-death account is advisable. You should consult with any attorney or other qualified estate planning professional before designating your account as a payable-on-death account.





PART 4: SIGNATURES

Signatures required.

I/We hereby direct that the balance remaining in this account shall be payable on death (of the survivor of us) to the above-named POD Beneficiary(ies) that survive me (us):

Primary Account Owner's Signature		Date
Joint Account Owner's Signature		Date
John Account Owner's signature		Duie
Note: Spousal Consent — Spousal consent required in CTX, WA and WI) if spouse is not named as the sole prima Signature is required.		
I have read the above beneficiary designation and, as to the above designation and relinquish all my statutory held hereunder.		
Spouse's Signature		Date
Notary Signature		Date
Notary Seal	Notary Commission Expiration	Notary Jurisdiction