

Request to Remove a Joint Owner

(Please Bring in Person or Mail Signed Original to DC Credit Union, 2000 14th St NW, WDC 20009)

To:	DC Credit Union
Re:	Primary Account Name:
	Account Number:
I, remov	, hereby authorize DC Credit Union to ve my name as the joint owner on the above account.
Signa	ture *
Date	
*Sign	nature must be notarized if not signed at Credit Union with proper ID.
Coun State: Subso	ty:
Notar My C	ry () Commission Expires:
Acce	pted by DC Credit Union (Staff Signature):
Proce	essed on: