



ACCOUNT NUMBER []

FORM OF NOMINATION

I, (Print Name).....

Of (Print Address).....

being a member of Capital Credit Union Limited, hereby revoke all previous nominations and nominate the following person or persons:

Table with 4 columns: NAME, ADDRESS, RELATIONSHIP, % of Property. Contains 5 empty rows.

to become entitled to such property in the credit union (whether in savings, deposits, insurances or otherwise) not exceeding the limit of the amount for the time of being authorised by law which I may have at the time of my death.

Note:

Under section 21(4) of the Credit Union Act 1997, a nomination shall not be revocable or variable by the will of the nominator or by any codicil of his/her will.

Under section 21(6) of the Credit Union Act 1997, the marriage of a member of a credit union shall operate as a revocation of any nomination made by him/her before his/her marriage.

Date:20.....

SIGNATURE _____

Witness.....Witness.....

Signature (must be a CCU officer)

Print Name

Address.....

(Please Print)

.....Occupation.....

WITNESS SHALL NOT BE THE NOMINEE