

# CBS Employees Federal Credit Union

PLEASE TYPE OR PRINT IN INK

ACCOUNT NUMBER

PLEASE PRINT **Share Draft Account Signature Card**

ATM/DEBIT CARD  YES  NO

Primary Member's Name		Years in California	
Address (No. & Street)		City	State Zip
Driver's License Number		Social Security Number	
Employer		Business Phone ( )	
Home Phone ( )	Date of Birth	Mother's Maiden Name	

By signing below, the undersigned (herein "I, me, mine, my" whether one or more persons means each and all of those who sign this signature card) is opening a share draft account with CBS EMPLOYEES FEDERAL CREDIT UNION ("you, your, yours") and agree that this account shall be governed by the terms set forth in my Agreement and Truth-in-Savings Disclosure.

X \_\_\_\_\_  
Primary Member's Signature

X \_\_\_\_\_  
Joint Tenant Signature (if applicable)

\_\_\_\_\_  
Date  
REV. 7/97

\_\_\_\_\_  
Date

**SEE REVERSE SIDE TO ADD A JOINT OWNER**

97-1256

**JOINT OWNER INFORMATION**

JOINT OWNER NAME			
DRIVERS LICENSE NUMBER		SOCIAL SECURITY NUMBER	
HOME PHONE (    )	BUSINESS PHONE (    )	DATE OF BIRTH	MOTHER'S MAIDEN NAME

**CAUTION:** If my Share Draft Account is held jointly, overdraft protection makes it possible for my joint tenant(s) to write overdrafts which could draw funds from my individual Regular Share Account and/or my individual Open-End Loan Account.

<b>OFFICE USE ONLY</b> <b>CHECK SYSTEM</b>	
PRIMARY OWNER: Social Security No. Issued _____ <input type="checkbox"/> No Retail Indicators _____ <input type="checkbox"/> No Records _____	JOINT OWNER: Social Security No. Issued _____ <input type="checkbox"/> No Retail Indicators _____ <input type="checkbox"/> No Records _____ Date: _____