

June 1, 2015

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Re: Your account request

Dear Valued Customer,

We have enclosed an Account Owner and Beneficiary Change Form. In order to add an owner or make beneficiary changes to your account, you will need to complete all fields on the attached form and return it to us in the enclosed postage paid envelope. Once we receive it, we will update your account accordingly.

Please note, this updated form will replace any earlier account owner or beneficiary elections and all existing owners and beneficiaries need to be restated on this form. Additionally, all owners must sign the form for the updates to be processed.

If you have a question or need assistance, please call 1-888-810-4013. Representatives are available Monday through Friday, 8 a.m. to 7 p.m. Eastern Time.

Sincerely,

Capital One Bank®

Enclosures: Account Owner and Beneficiary Change Form
Account Agreement
Postage Paid Envelope

Account #

Account Owner and Beneficiary Change Form and Instructions:

This updated form will replace any earlier account owner or beneficiary elections.

All existing owners and beneficiaries need to be restated on this form.

All owners must sign the form for your request to be processed.

Completing and mailing this form confirms your revised account owner and/or beneficiary elections for this account.

Important Information:

Primary Owner's Social Security Number/ EIN will be used for tax reporting purposes for the entire current tax year.

If you wish to remove an owner, this does require that we close this account and open a new one.

ACCOUNT OWNER INFORMATION (Beneficiary information should not be listed here. Please see next page)

1

Primary Owner's Name

Primary Owner's Physical Address

Primary Owner's City, State, Zip

Primary Owner's Social Security Number or EIN

Primary Owner's Date of Birth

2

Co-Owner's Name

Co-Owner's Physical Address

Co-Owner's City, State, Zip

Co-Owner's Social Security Number or EIN

Co-Owner's Date of Birth

3

Co-Owner's Name

Co-Owner's Physical Address

Co-Owner's City, State, Zip

Co-Owner's Social Security Number or EIN

Co-Owner's Date of Birth

4

Co-Owner's Name

Co-Owner's Physical Address

Co-Owner's City, State, Zip

Co-Owner's Social Security Number or EIN

Co-Owner's Date of Birth

Please continue on the reverse; Additional information and your signature required



Account # _____

ACCOUNT SELECTIONS - BENEFICIARY INFORMATION

Please provide the information below for up to six (6) beneficiaries to this account. If you do not want to assign any beneficiaries please check this box Note that any previous beneficiary selections will be overwritten by the selections below.

_____ Beneficiary's Name	_____ Beneficiary's Social Security Number
_____ Beneficiary's Name	_____ Beneficiary's Social Security Number
_____ Beneficiary's Name	_____ Beneficiary's Social Security Number
_____ Beneficiary's Name	_____ Beneficiary's Social Security Number
_____ Beneficiary's Name	_____ Beneficiary's Social Security Number
_____ Beneficiary's Name	_____ Beneficiary's Social Security Number

ADDITIONAL INFORMATION

Taxpayer Identification Number Certification*
Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
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. citizen or other U.S. person (defined in the instructions).
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

****You must 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 interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.**

Any incorrect or missing information on this Signature Card may cause delays in the requested changes to this account.

Information about procedures for adding owners to this account: 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 to you: When you add an owner or authorize a party to exercise authority and control on this account, we will need their name, address date of birth, and other information that will allow us to identify them.

Agreement to Terms

I/We agree to be bound by the Capital One Account Agreement and terms and conditions that are currently in effect for my/our account.

The Internal Revenue Service does not require your consent to any provisions of this document other than the certification required to avoid backup withholding.

_____ Owner's Signature	_____ Date	_____ Owner's Signature	_____ Date
_____ Owner's Signature	_____ Date	_____ Owner's Signature	_____ Date

*If you would like to receive instructions or information on Taxpayer Identification Number Certification or how to apply for a Taxpayer Identification Number, please write us at Capital One Bank, P.O. Box 180, St. Cloud, MN 56302-0180. Customer Service Line: 1-888-810-4013, Monday through Friday, 8 a.m. to 7 p.m. Eastern Time.