

CNB Account Number _____ Account Owner Name _____

1. BENEFICIARY DESIGNATION

Transfer on death is a form of account registration which allows the individual owner, the last surviving joint tenant, or each tenant in common to transfer upon their death their ownership of the account to one or more designated beneficiaries without going through probate or being subject to the deceased person's will.

If the account has multiple individual owners who own as tenants in common, each Account Owner should submit CNB's TOD Designation Form to CNB. If the account has multiple owners who own as joint tenants with rights of survivorship, account ownership vests entirely in the surviving Account Owner at the death of the first Account Owner.

Upon my death, the primary beneficiaries named below will receive my account assets. In the event my primary beneficiaries predecease me, the contingent beneficiaries named below will receive my account assets. Unless I list my designation as per stirpes, if one of my beneficiaries predeceases me, such beneficiary's share will be divided on a pro-rata basis to the other beneficiaries that share the deceased beneficiary's classification. If all of the beneficiaries predecease me, my account assets will be paid to my estate. In the event I have failed to assign percentages, the beneficiaries will share equally. If I have designated percentages and the percentages do not equal 100%, any remaining percentage will be divided equally among the beneficiaries. I understand that CNB limits designations to six individuals or entities per classification. In the event a beneficiary is not listed, my estate will be treated as the primary beneficiary. This designation revokes and supersedes all earlier beneficiary designations which may apply to this account.

<i>Primary</i>	<i>Contingent</i>	Name	SSN/TIN	Relationship	Birthdate	Percent*
<input type="checkbox"/>	<input type="checkbox"/>	1) _____	_____	_____	_____	_____
		Address: _____				
<input type="checkbox"/>	<input type="checkbox"/>	2) _____	_____	_____	_____	_____
		Address: _____				
<input type="checkbox"/>	<input type="checkbox"/>	3) _____	_____	_____	_____	_____
		Address: _____				
<input type="checkbox"/>	<input type="checkbox"/>	4) _____	_____	_____	_____	_____
		Address: _____				
<input type="checkbox"/>	<input type="checkbox"/>	5) _____	_____	_____	_____	_____
		Address: _____				
<input type="checkbox"/>	<input type="checkbox"/>	6) _____	_____	_____	_____	_____
		Address: _____				

*If no percentage is indicated, the named beneficiaries will share equally.

2. ACCOUNT OWNER SIGNATURE

I understand this designation of beneficiary(ies) will be effective on the date of receipt by CNB. I retain the right to revoke this designation of beneficiary(ies) and to designate a new beneficiary(ies) at any time in a manner acceptable to Community National Bank. If said beneficiary(ies) does not survive me or if Community National Bank cannot locate said beneficiary(ies) after reasonable search, I direct that any balance in this account be paid to my estate. I further understand that Community National Bank cannot provide legal advice, and I agree to consult with my own tax and/or legal professional for advice.

X _____
Signature of Account Owner Date

X _____
Signature of Additional Account Owner Date

3. NOTARY PUBLIC - *REQUIRED*

Notary: Subscribed and sworn before me this _____ day of _____, _____.

SEAL

Notary Public Signature _____

My Commission Expires: _____

4. MARITAL STATUS

I Am Married. I understand that if I designate a primary beneficiary other than my spouse, my spouse must consent by signing below.

Single or Widowed. I understand if I marry in the future, I must complete a new Transfer on Death form which includes spousal consent documentation.

Spousal Consent: Must be completed if you spouse is not 100% primary beneficiary or for married account owners wishing to hold their account as joint tenants with rights of survivorship with someone other than their spouse.

I am the spouse of the account owner. I understand there are significant consequences associated with giving up any interest I may have in the account. I have not received legal or tax advice from the custodian. I have received a fair and reasonable disclosure of the Account Owner's assets or property and am aware of any financial obligations the owner is subject to in our state of residence. In the event I have a legal interest in the Account Owner's assets or property, I hereby disclaim any such interest in the assets held in this account and consent to the beneficiary designation set forth in the Transfer on Death section of this form.

X _____
Signature of Spouse Date