

DECLARATION AND RELEASE

(For Accounts of \$10,000.00 or less)

Name of Declarant: _____

Address of Declarant: _____

Name of Decedent: _____

Date of Death: _____

Funeral Home: _____

As the Declarant, I hereby:

(a) state I have the following relationship with the Decedent: _____
(e.g. child, wife, husband, father or mother);

(b) declare that, except as noted below, there exists no other individual with a family relationship entitled to higher or the same priority under 20 Pa. C.S.A. §3101 to make a claim for the Decedent's monies held by Members 1st Federal Credit Union ("Members 1st FCU"). **The order is as follows: (1) spouse, (2) child, (3) father or mother, (4) sister or brother.** Other family members and their relationships: _____

_____ ;

(c) state that I have provided Members 1st FCU with a receipted funeral bill or an affidavit, executed by a licensed funeral director, which sets forth that satisfactory arrangements for payment of funeral services have been made;

(d) release Members 1st FCU and its officers, directors, employees and agents from any and all claims, liabilities and obligations, both known and unknown, that arise out of or are in any way related to the release of monies from Decedent's account(s) to me;

(e) agree to indemnify, defend, and hold harmless Members 1st FCU, and its officers, directors, employees and agents, from and against all liability, loss, cost or expense (including attorney's fees) for any claim made against or to Members 1st Federal Credit Union arising out of or related to the release of monies pursuant to this Declaration; and

(f) acknowledge receipt of \$_____ from the account(s) of the Decedent by Members 1st FCU and/or authorized a payment to the Funeral Home in an amount equal to the receipted funeral bill to the Funeral Home.

(g) I understand that this Declaration and Release and the statements contained herein are made subject to the penalties of 18 Pa. Cons. Stat. Ann. § 4904, relating to unsworn falsification to authorities.

Date:

Declarant:
