



**NAPUS VISA DEBIT CARD
Removal of Authorized User**

I, _____, authorize NAPUS Federal Credit Union to remove the following authorized user(s) from my Visa Debit Card.

(PLEASE PRINT)

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Member Signature _____ Date _____

Member Name (Printed) _____ Member Number _____

NAPUS FCU Visa Debit Card# _____ Phone Number _____