

Use this form to close your old account

Date _____

Bank Name _____

Address of Bank _____

City _____ State _____ Zip _____

Please close this account number _____ (savings? checking? circle one).

Please send a check for the remaining balance to the address below. The last check numbers I have written are: _____. I have already moved my automatic payments and direct deposits to a new account.

If you have questions, please contact me:

Account Holder Name (print) _____

Address _____

City _____ State _____ Zip _____

Phone _____

Account Holder Signature _____