

ACCOUNT CLOSING REQUEST

Financial Institution

Address

City

State

Zip

RE: Close My Account(s)

Attention: Account Maintenance

This letter is to inform you that I am closing my accounts at your financial institution. Please close the following account(s) listed below and send a check for the remaining balance(s) to my address.

If you have any questions regarding this request, please contact me at the phone number listed below. Thank you for your prompt assistance in this matter.

Authorized Signature

Date

ACCOUNT INFORMATION

Name

Phone

Address

City

State

Zip

Account #1

Account #2

Account #3