

# Close Account

Date: \_\_\_\_\_

Bank's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

To Whom It May Concern:

Please close my account # \_\_\_\_\_ (account number), and send a check for the remaining balance to me at the address listed below.

If you have any questions about this request, please contact me during the Daytime / Evening (circle one) at \_\_\_\_\_ (phone number). Thank you.

Sincerely,

X \_\_\_\_\_ X \_\_\_\_\_  
(Primary Account Holder Signature) (Secondary/Joint Account Holder Signature)

\_\_\_\_\_  
(Name – please print) (Name – please print)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
City State Zip