



CLOSE ACCOUNT

DATE

BANK'S NAME

STREET ADDRESS

CITY, STATE, ZIP

TO WHOM IT MAY CONCERN:

Please close my account # _____, effective today, 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 at _____

Signature

Joint Owner Signature

Name (please print)

Joint Owner Name (please print)

Street Address

City, State, Zip