



To: FINANCIAL INSTITUTION

ADDRESS

CITY

STATE

ZIP



Re: Closing Account
Attn: Customer Service

I have recently changed financial institutions and would like to close the following account(s).

CHECKING ACCOUNT

SAVINGS ACCOUNT

OTHER

ACCOUNT#

NAME(S) ON THE ACCOUNT

ACCOUNT SIGNATURE

JOINT ACCOUNT SIGNATURE

CHECKING ACCOUNT

SAVINGS ACCOUNT

OTHER

ACCOUNT#

NAME(S) ON THE ACCOUNT

ACCOUNT SIGNATURE

JOINT ACCOUNT SIGNATURE



All transactions on the account(s) have been completed and all automatic payments have been stopped. Please accept this letter as my authorization to close my account.

Please make a check payable to . If you have any questions regarding this request, please contact me by phone or mail. Thank you for the prompt assistance.

PRINT NAME

SIGNATURE