

Please close my account

Date_____

Bank Name_____

Address of Bank_____

City_____ ST_____ ZIP_____

To whom it may concern:

Please close the following account #_____ and send a check for the remaining balance to the address below.

If you have any questions concerning this request, please contact me at the following number.

Phone _____ Day/Evening (circle one)

Sincerely,

Signature _____

Name (print) _____

Co – Signer Signature _____

Co – Signer Name (print) _____

Address_____

City_____ ST_____ ZIP_____