



Account Closure Request

I hereby request that you close the following accounts that I maintain with you:

- Membership (All Account) Share Draft (Checking) Other accounts: _____
(Christmas club, Certificate of Deposit, Etc.)

Name: _____

Account Number: _____

Reason(s) for Closing: _____

Date: _____

Account Owner's Signature: _____

I currently have the following attached to this account:

- ATM Card Spouse Card Checkbook Payroll Transfers Auto Pay

Credit Union Use Only:

- Closed SH, Draft, ACH & Debit Card
- Close\Deactivate DC in Client Central
- Pull Member Card and File
- Check Day Batch

Initial and Date _____ Verified by _____