

CLOSE ACCOUNT

DATE	
BANK'S NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
TO WHOM IT MAY CONCERN:	
Please close my account #, balance to me at the address listed below.	effective today, and send a check for the remaining
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