## **Notice to Close Account**

Date:			
Date:			
Financial Institution Name: (ATTN: Customer Servi	ce Department)		
Address:			
City:	State:	Zip Code:	
Dear Sir or Madam:			
I have recently changed financial institutions and v	would like to close the account	below immediately.	
Account Number:			
Name(s) on the Account:			
Please forward all remaining funds to me at the fo	llowing address:		
Address:			
City:	State:	Zip Code:	
If you have any questions, please call me at:			
Thank you,			
Sincerely,			
Signature:	Printed Name:		
Joint Account Holder Signature:	Printed Name:	Printed Name:	