

Account Closing Request

Please close my account.

(Date)

(Bank Name)

(Address)

(City/State/Zip)

To Whom It May Concern:

Please close the following account number:

And send a check for the balance remaining to the address below.

If you have any questions regarding this, please call me. Thank you.

(Name)

(Signature)

(Co-signer)

(Co-signer Signature)

(Address)

(City/State/ZIP)

(Telephone)