## Close account

Bank name			Address	Address		
			City	State	Zip code	
ATTENTION: Acc		enance				
This letter is to inform you I am closing my accounts at your bank. Please close the following account(s) listed below and send a check for the remaining balance(s) to my address. If you have any questions regarding this request, please contact me in writing or at the phone number listed below. Thank you for your prompt assistance in this matter.						
Sincerely,						
Authorized signature (original signature required to authorize change)			ge) Date	Date		
Account	t infor	mation				
First name			Savings ac	count number(s	5)	
Last name			Checking a	account number	(s)	
Address						
City	State	Zip code				
Day phone	Eve	ening phone				

