

Account Close Letter

Instructions: Print, complete, and submit this form to your financial institution to close your savings and/or checking account.

Date: _____

Financial Institution: _____

Address: _____

City: _____ State/Zip: _____

To Whom It May Concern:

Please accept notice to close the following account(s) effective immediately or as of _____.
(DATE)

Account Number(s): _____

and, on my behalf, send a check for the balance to my new account at:

**AAEC Credit Union
115 S Wilke Road #106
Arlington Heights, IL 60005**

I have also made arrangements, if applicable, to discontinue my Direct Deposit to my account and automatic withdrawals from my account(s) with your institution. I understand that it is my responsibility to make sure all checks, automatic debits, and other transactions have cleared before completely closing my account(s).

If you have any questions regarding this request to close my account(s), please contact me at: _____

Thank you for your assistance.

Sincerely,

Signature

Name: _____

Address: _____

City: _____ State/Zip: _____