



# Valley COMMUNITIES

CREDIT UNION  
.....Where Membership Matters

## Request to Close Account Notice

Use this form to notify your former financial institution that you are closing your account(s).  
Please be sure that all outstanding checks have cleared and all direct deposits and/or  
automatic payments have been stopped before closing the account.

Financial Institution Name: \_\_\_\_\_

Financial Institution Address: \_\_\_\_\_

### To Whom It May Concern:

Please close the account(s) noted below.

#### Effective:

Immediately

On (date) \_\_\_\_\_

Account Number: \_\_\_\_\_

Checking

Savings

Account Number: \_\_\_\_\_

Checking

Savings

Account Number: \_\_\_\_\_

Checking

Savings

Account Number: \_\_\_\_\_

Checking

Savings

Please forward all remaining balances to me at the following address:

### Valley Communities Credit Union

FBO: \_\_\_\_\_

Checking

Savings

440 8th Street South

Wisconsin Rapids, WI 54494

If you have any questions about this request, please contact me at:

Phone (daytime): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_