

CLOSE ACCOUNT

Instructions: Use this form to close your account at your existing financial institution and have your funds transferred to Matadors Community Credit Union. Before you send this form to us, be sure all of your outstanding checks and automatic withdrawals have paid from the account your are closing. The credit union will not be responsible for returned checks or additional penalties for closing your account.

Date

Financial Institution Name

Address

City, State, Zip

To Whom It May Concern:

Please close my checking account _____ (account number) and send a check for the remaining balance made payable to me at the address listed below. All of my/our outstanding checks and automatic withdrawals have paid from this account.

Please deposit to my MCCU:

- Savings Account
- Checking Account

If you have any questions about this request, please contact me during the DAY/EVENING (circle one) at (____) _____ (phone number).

Thank you.

Sincerely,

Signature

Co-Signer Signature

Name (please print)

Co-Signer Name (please print)

Mail check(s) to :
Matadors Community Credit Union
Attn: Member Services
P.O. Box 1052
Northridge, CA 91328