



Account Closure Notification

A separate form is needed for each account

Date

Financial Institution Name

Address

City/State/Zip

To Whom It May Concern:

Please close my account(s) with your financial institution:

Account Numbers: _____

Account Holders: _____

I hereby authorize closure of this account. All my checks have cleared and all direct deposits and automatic withdrawals have been stopped.

Closure should take effect on: _____

Please mail my balance to:

Pocatello Railroad Federal Credit Union

4708 N. Yellowstone Ave.

Chubbuck, ID 83202

(208) 232-5746

Routing Number: 324173707

Account Number: _____

Thank you and please contact me if there are any questions regarding this request.

Signature

Joint owner signature (if applicable)

Phone Number