



Letter of Closure

To:

Financial Institution:

Address:

City, State, Zip:

From:

Primary Account Holder:

Social Security Number:

Secondary Account Holder:

Contact phone #:

This letter serves as an authorization to close the following accounts with your institution:

Account #:		Account Type:	
Account #:		Account Type:	
Account #:		Account Type:	
Account #:		Account Type:	

Send a check for the remaining balance, together with all accrued interest or dividends, to:

Malheur Federal Credit Union F/B/O _____

Attention: _____

P.O. Box 520, Ontario, OR 97914

Routing Number: 323274869

New Account #: _____

Myself

Address for check: _____

Signature:

Date: