

KEMBA Peoria Credit Union

Account Closure Notification

*** A Separate form is needed for each account ***

Please close my Account with the Credit Union.

Account Holder: _____

Account Number: _____

Reason I Am Closing My Account: _____

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:

Name: _____

Address: _____

Please contact me if there are any questions regarding this request.

Signature: _____

Phone Number: _____

Form must be mailed or faxed to the Credit Union. No account will be closed without a proper signature from the member.