

Close Old Account Form

Place completed form in envelope and mail with original signature to your current financial institution.

Close Account Request

_____ Today's Date

Bank/Credit Union Name

Bank/Credit Union Address

City, State and Zip

Account # (To Be Closed)

Please close the above referenced checking account and forward funds to:

North East Texas Credit Union

PO Box 1480

Lone Star, TX 75668

Routing #: 311985746

Checking Account #: _____

I hereby authorize the closure of this checking account effective _____

Date

Signature

Name (Please Print)

Address

City, State and Zip