## **Account Closure Form**

Give to your previous financial institution

closing.



Please close this account as instructed be	low.			
Previous Financial Institution				
Account Number to be closed				
Name(s) on account				
Address				
City	State		_Zip	
Daytime Phone ()  I authorize the closing of my account effect				
Please transfer any remaining balance to:	7181 Camp	merica Credit U ous View Dr o Ut 84084	Inion	1-800-748-4302
Mountain America Credit Union Routing Nu	umber:	324079555		
		Account Num	ber:	
		■ Savings		
		□ Checking		
Authorized Signature(s):				
Date:				
*Dlease ensure your account is active with sufficient fund	le long enquab f	or outstanding chocks	s and withdr	awale to clear before