



CLOSED ACCOUNT FORM

Member Name: _____ Member # _____

Acct. Balance: \$ _____ Cash Check Transfer to TTSWCU acct # _____

Reason For Closing Account: _____

Signature: _____ Date: _____

For Credit Union Use Only

Closed Entire Account Closed: Checking / Money Market / Christmas Club / Saver’s Club
(circle one)

Update Debit Card: Sharetec STAR

Debit Card Closed MasterCard Closed Online/eStmt/Bill Pay Safe Deposit Box Closed

Current Address Loan Transfers (notify LN dept) Share Transfers (notify accounting office)

Verification Initials: _____
(Teller) (VP) (MB SRV Officer)