



CLOSE-OUT ACCOUNT REQUEST

Account No. \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Copy of ID Required
ID Type \_\_\_\_\_
ID No. \_\_\_\_\_

Street \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone No. \_\_\_\_\_

Home Work Mobile

Account Type

- Main Share, Checking, Sub-Share, Holiday Club, Vacation Club, IRA

Reason for Close Out

If the member's address is changing, please provide an updated address for mail to be forwarded to:

\_\_\_\_\_  
\_\_\_\_\_

Member's (or Personal Representative) Signature

Branch Office

MVCU Staff Representative

Manager's Signature

For Merrimack Valley Credit Union Use Only

- Access Point (PSCU), Bill Payer, CardValet, DeposZip, eStatements, Mobile Banking, Online Banking, VISA Debit / ATM Card, VISA credit card, XDI

Check Number \_\_\_\_\_

Check Amount \$ \_\_\_\_\_

Cash Amount \$ \_\_\_\_\_