



▲ *Close Account*

Please complete and return to Redwood Credit Union.

Date

Financial Institution You Are Leaving

Financial Institution's Address

City, State, Zip

To Whom It May Concern:

Please close my account _____ (account number), and
send a check for the remaining balance to me at the address listed below.

If you have any questions about this request, please contact me during the **DAY / EVENING** (circle one) at

(_____) _____ (phone number).

Thank you.

Sincerely,

Signature

Co-Signer Signature

Name (please print)

Co-Signer Name (please print)

Address

City, State, Zip

(800) 479-7928
redwoodcu.org