



P.O. Box 1530, Port Townsend WA 98368
(360) 385-3663 www.QuimperCU.com

Your Original Jefferson County Credit Union Since 1939

Funds Transfer/Account Closure Request

To Whom It May Concern:

Please close my account described below:

Name(s) on Account: _____

Street Address: _____

City, State & Zip: _____

Account Type: _____

Account Number: _____

(Check One)

- The Account balance is zero.
- Mail a check for the balance of the account, payable to:

Name(s) on Account: _____

Street Address: _____

City, State & Zip: _____

- Mail a check for the balance of the account, payable to:

Quimper Community Federal Credit Union for the benefit of: _____
Name(s) on Account

To be deposited in Quimper Community Federal Credit Union Account Number: _____

Mail to: **Quimper Community Federal Credit Union**
P.O. Box 1530, Port Townsend, WA 98368

Thank you for your prompt attention to this matter.

Account Holder Signature: _____ Date: _____

Joint Account Holder Signature: _____ Date: _____

Other Joint Account Holder Signature: _____ Date: _____

This form may be used to close accounts at other financial institutions and transfer the funds to an existing Quimper account.