

**Midland Co-op Credit Union  
5210 Central Ave NE, Suite 200  
Minneapolis, MN. 55421-1847  
763-572-1368**

**CLOSE ACCOUNT REQUEST**

Member(s) Name: \_\_\_\_\_ Member Account # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Main Phone # \_\_\_\_\_ E Mail: \_\_\_\_\_

PLEASE CLOSE THE FOLLOWING ACCOUNT(S) EFFECTIVE (date) \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_

Account # \_\_\_\_\_ Account # \_\_\_\_\_

\_\_\_\_\_ (Initial) I have canceled any authorized deposits and pre-authorized payments drawn against this account. I understand that if a deposit attempts to post to my account after I close it or an item attempts to debit from my account, the item will be returned "Account Closed".

\_\_\_\_\_ (Initial) All my checks and/or Visa Debit Card transactions have cleared this account. I have destroyed all unused checks and the Visa Debit Card. I will be responsible for any checks returned "Account Closed" plus any charges incurred after the above date.

Reason for closing: \_\_\_\_\_

All remaining funds will be mailed in the form of a check to the address on file.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint Member Signature \_\_\_\_\_ Date \_\_\_\_\_

**Credit Union Use Only:**

Check # \_\_\_\_\_ Date \_\_\_\_\_ Teller \_\_\_\_\_