



# ALABAMA TEACHERS CREDIT UNION

## Request to Close Account Form

\_\_\_\_\_

Date

\_\_\_\_\_

Name of Financial Institution

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

Zip

\_\_\_\_\_

Account #

I hereby authorize the closure of my account. I have verified that all my outstanding checks have cleared, and all my direct deposits/automatic payments/withdrawals have been stopped. Please close my account \_\_\_\_\_ (list the type(s) of account(s) and the account number(s) and make this change effective \_\_\_\_\_. (Date)

Thank you for your assistance.  
Sincerely,

\_\_\_\_\_

Primary Owner Name

\_\_\_\_\_

Phone Number (Call with any questions.)

\_\_\_\_\_

Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

Zip

\_\_\_\_\_

Signature of Primary Owner

\_\_\_\_\_

Date

Please send remaining balance to:  
Alabama Teachers Credit Union  
702 Walnut Street  
Gadsden AL 35901

Routing# 262284431

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

\_\_\_\_\_

ATCU Teller Signature

\_\_\_\_\_

Date