

I, _____, wish to close out account number _____ and stop all payroll deductions associated with SMID number: _____.

I choose to receive the funds via:

Cash (up to \$500)

Check

Western Union (Fee: \$17)

Wire Transfer (Fee: \$17)

I understand that by signing this document I will forfeit my share in U-Haul Federal Credit Union and I will no longer be a member and will no longer have access or rights to our services and products.

Signed: _____ Date: _____

No requests will be processed without submission of a copy of government issued identification

For Credit Union use only:

Date Closed:

Verified Identification: _____

Closed in Cubics: _____ **Closed in STAR:** _____ **Payroll Stopped:** _____

Completed by: _____ **Date:** _____

ATTACH ANY RELATED CORRESPONDENCES