

U-HAUL FEDERAL CREDIT UNION

CLOSING ACCOUNT FORM

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

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

I choose to receive the funds via:

Cash (up to \$1,000)

Check

Western Union (Fee: \$20)

Wire Transfer (Fee: \$20)

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

Signed: _____ Date: _____

For Credit Union use only:

Date Closed: _____

Verified Identification: _____

Verify No Pending Transactions: _____

Cubics: _____ **Virtual Branch:** _____ **Client Central/Stopped Debit Card Reissue:** _____

Payroll Deductions Stopped: _____ **File placed in Closed Accounts:** _____

Completed by: _____ **Date:** _____

ATTACH ANY RELATED CORRESPONDENCES