



1st SouthWest Bank

We Can Help You Get There™

ACCOUNT CLOSING LETTER

Current Account Number: _____

Customer Name: _____ Date: _____

To Whom It May Concern:

Please accept this letter as my written authorization to close the following account(s) at your financial institution. All of my transactions have cleared and I have stopped all currently scheduled debits and credits to my account.

Account Type

Account or Card Number

Please forward remaining funds to me at the following address:

Street Address: _____

City _____ State _____ Zip _____

If you have questions about this request, please contact me at:

Phone Number:

Thank you.

Sincerely,

Authorized Signature

Co-Signer Signature (if applicable)

866.641.3792 | fswb.com



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