

Existing Account Closing Form

Complete this form and return it to your old bank.

To Whom It May Concern:
Please close my account described below.

Name(s) on Account

Social Security / TAX Identification Number

Account Number Account Type

Check only one:

No Disbursement of funds is necessary

The account balance is zero.

I have deposited a check for the balance in my new bank.

Disbursement of fund is necessary. Prepare a cashier's check for the balance of my account payable to:

Names on account, and mail to:

Name _____

Address _____

City _____ State _____ Zip _____

Texas Gulf Bank for the benefit of _____

Texas Gulf Bank Account Holder's Name

To be deposited in Account Number: _____

Mail the cashier's check to:

Texas Gulf Bank

Customer Service

1717 N. Velasco

Angleton, TX 77515

Thank you for your prompt attention to this matter. If you have any questions, I can be reached at the following phone number: _____

Sincerely,

Account Holder Signature

Date

Joint Account Holder Signature

Date