



Existing Account Closing Form

Please complete this form and submit it to your former bank.
One form should be used for each request.
Attach new Home State Bank voided check or deposit ticket here.

To Whom It May Concern:

Please accept this form as my formal authorization to close my account(s) with your institution. Please forward all remaining funds to Home State Bank (plus any interest accrued, if applicable) by check to the address stated below.

Please close the following account(s):

Account # and Type _____

Account # and Type _____

Please mail an official bank check made payable to:

Name
c/o Home State Bank - Branch Manager

Banking Center Address

City, State, Zip

For additional information, I can be reached at (____)____-_____

I would prefer to be contacted in the (circle one):

Morning Afternoon Night

I appreciate your prompt service regarding this matter. Thank You.

Customer Signature

Date

Joint Account Holder Signature

Date