

CHECKING ACCOUNT CLOSURE NOTICE

NAME

SOCIAL SECURITY #

JOINT OWNER IF APPLICABLE

PREVIOUS FINANCIAL INSTITUTION

NAME OF INSTITUTION

STREET

CITY

STATE

ZIP

CHECKING SAVINGS OTHER _____

ACCOUNT # _____

CHECKING SAVINGS OTHER _____

ACCOUNT # _____

CHECKING SAVINGS OTHER _____

ACCOUNT # _____

CHECKING SAVINGS OTHER _____

ACCOUNT # _____

PLEASE MAIL BALANCE TO:



SECURITY STATE BANK

- Basin – PO Box 531, Basin, WY 82410 (307) 568-2483
- Gillette – PO Box 489, Gillette, WY 82717 (307) 686-8080
- Sheridan – 2070 Coffeen Ave, Sheridan, WY 82801 (307) 672-8080
- Worland – 320 N. 10th, Worland, WY 82401 (307) 347-4300
- Greybull – 901 N 6th St, Greybull, WY 82426 (307) 765-2600

I hereby authorize the closure of the account(s) listed above. All my checks have cleared the account to be closed, and all direct deposit and automatic payments have been stopped.

SIGNATURE

DATE

JOINT SIGNATURE (if applicable)

DATE