



## Suncoast Schools Federal Credit Union Request to Close Account

Member # \_\_\_\_\_

SSN \_\_\_\_\_

Suffix \_\_\_\_\_ Suffix \_\_\_\_\_ Suffix \_\_\_\_\_ Suffix \_\_\_\_\_

Member Name \_\_\_\_\_

Type of Account(s):  Personal  Business

- Membership share (savings) **Note: Cannot close membership shares (savings) if certificates, IRA, DCP, ATM, Check Card, Safe Deposit Box, Loans, Student Loans, Credit Card or payroll exists.**
- Special Share (savings)
- Share Draft (checking) \*
- Money Market \*

**\* All drafts Check Card, ATM transactions must be posted prior to closing a Share Draft or Money Market account. Drafts may be paid from a new account due to fraud, lost/stolen drafts only.**

**Reason for closing account(s):  
Check the applicable box(es)**

- Dissatisfaction with service
- Inconvenient locations
- Non competitive rates
- Moving out of area
- Consolidating accounts
- Other \_\_\_\_\_

**If account is being closed due to fraud, lost or stolen checks complete the section below.**

I hereby request and authorize Suncoast Schools Federal Credit Union to pay the outstanding drafts listed below from account number \_\_\_\_\_ of which I am an owner or joint owner/authorized signer of.

# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____

\_\_\_\_\_  
Member/ Joint Owner/ Authorized Signer

\_\_\_\_\_  
Daytime phone number

**Credit Union use only:**

Date account closed \_\_\_\_\_ Processor \_\_\_\_\_ Service Center \_\_\_\_\_  
 Suffix \_\_\_\_\_ Suffix \_\_\_\_\_ Suffix \_\_\_\_\_ Suffix \_\_\_\_\_  
 Closing Balance \$ \_\_\_\_\_  
 Transfer to account # \_\_\_\_\_  
 Issued Check # \_\_\_\_\_

**Fax requests with outstanding drafts to the Resolutions Department at (813) 635-8998 and the EFT Department at (813) 621-5594; forward original to the Records Department.**