



Simple Switch Account Closure Form

To Whom It May Concern:

Please close the following account(s) number(s):

and send a check for the remaining balance to the bank's address below.

BankStar Financial

For Benefit Of (Name) _____

PO Box A

Elkton, SD 57026

If you have any questions, please contact me at:

Phone Number: _____

Thank you!

Account Owner: _____

Street Address: _____

City, State, Zip: _____

Signature: _____

Date: _____