

Form Number - 1446312 Click here after using Print Icon

## **Worksheet To Close Account** Bank Number 165

Entry Date 06/29/2020 09:46 AM EST

**Branch Number 106** 

Prepared By Karla Kieselbach

**Account Title MOMS CLUB OF** 

ALPHARETTA WEST CheckCard Tied To Account NO

Closed By Bank

**Account Number** 1012129324

Account Type 200

**Paving Accrued Interest** 

NO

**Reason For Closing** 

**Ownership Change** 

## ACKNOWLEDGMENT OF CUSTOMER IN CONNECTION WITH ACCOUNT CLOSING:

I hereby authorize the Bank to close the above account. I understand that the account will not be considered closed until a zero balance is reached, and until that time, the Bank will honor checks and other items presented for payment in the order in which presented as long as sufficient funds remain in said account to pay said items. Any check or item which exceeds in amount the account balance at the time of presentation shall be returned by reason of "account closed," and I agree to indemnify and hold the Bank harmless from any claim, demand or suit initiated against Bank or any liability imposed on Bank as a result thereof, by reason of Bank's return of any checks or other items for which said account has insufficient funds at the time presented.

I understand that Bank will waive its regular service charges for the account for a two-month period commencing on the date hereof, but the Bank will resume the imposition of its normal service charges on the account if any credit balance remains in said account at the end of said two-month period. For interest-bearing accounts, the Bank will no longer pay or accrue interest on the account once this document has been signed by the customer.

780.20 **Current Balance Plus Accrued Interest** 0.00 **Apply Withholding** 0.00 Adjusted Closing Balance 780.20

Minus Outstanding Debits 0.00 780.2 Subtotal 0.00 Minus Closing Fee **Customer Closing Balance** 780.20

Official Check **Funds Disbursement** 

**Waive Closing Fee** 

NO

Customer's Signature X Waller C Ping