



ATTN: MEMBER SERVICES
 PO BOX 6006
 BETHESDA, MD. 20827
 1.800.821.7280
 FAX: 301.634.5275
 WWW.MEFCUDIRECT.COM

MEMBERSHIP CLOSURE AUTHORIZATION

ADDITIONAL VALID NON-EXPIRED DOCUMENTATION IS REQUIRED. Two Acceptable Forms of Identification are: State Driver's License, Government Issued Identification, Photo State Identification, Change of Address Card from MVA(MD.) with a Driver's License, or Utility Bill, Major Credit Card Bill, Phone Bill, Cable Bill, or Paystub (no more than 30 days old) with address and member name

PLEASE MAIL OR FAX TO THE ATTENTION OF MEMBER SERVICES. THANK YOU

PLEASE PRINT LEGIBLY IN BLACK OR BLUE INK

MEMBER INFORMATION			
ACCOUNT#:	SAV: <input type="checkbox"/> S1 <input type="checkbox"/> S2 <input type="checkbox"/> S6	CHK: <input type="checkbox"/> S5 <input type="checkbox"/> S35	OTHER:
NAME			
ADDRESS		APT/SUITE#	
CITY		STATE	ZIP
DISBURSEMENT OF FUNDS (CHECK ONE)			
<input type="checkbox"/> BY CHECK PAYABLE TO MEMBER ONLY (TO ADDRESS ON FILE)			
<input type="checkbox"/> DEPOSIT TO MEFCU ACCOUNT# (WITH MEMBER NAME)			
REASON FOR CLOSURE			
RELOCATING <input type="checkbox"/>	CHANGING FINANCIAL INSTITUTION <input type="checkbox"/>	OTHER (PLEASE EXPLAIN BELOW) <input type="checkbox"/>	
OTHER:			
CLOSURE SURVEY			
WHAT COULD WE HAVE DONE DIFFERENTLY/BETTER?			
HOW LIKELY IS IT THAT YOU WOULD RECOMMEND MEFCU TO YOUR FRIENDS, FAMILY OR COLLEAGUES?			
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8
<input type="checkbox"/> 9	<input type="checkbox"/> 10		
LEAST LIKELY		MOST LIKELY	

NO DIGITAL SIGNATURE

MEMBER SIGNATURE:	DATE:
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CREDIT UNION USE ONLY		
PROCESSED BY:	OP#:	DATE: