



800 W. Grant Hwy., PO Box 255
Marengo, IL 60152
815-568-4100
www.prairiecommunitybank.com

Closing my previous account

Date _____

Bank Name _____

Address _____

City _____ State _____ ZIP _____

Please close the following account(s).

Checking Savings Account number _____

Checking Savings Account number _____

Please make a check payable to me for the remaining balance and mail the check to Prairie Community Bank at the address listed above.

You may contact me at the following phone number if you have any questions about this request.

Phone _____ Day Evening

Sincerely,

Signature _____ Co-signer _____

Name _____ Co-signer _____
(Please print) (Please print)

Address _____

City _____ State _____ ZIP _____