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## SHARE CLOSURE FORM

Thank you for allowing us to serve you. We constantly strive to improve our service and ask that you please take a moment to help us by completing this form and telling us why you are closing your share.

### MEMBER INFORMATION (Please type or print clearly)

Name:

Account Number:

Share ID:

### REASON FOR CLOSURE

Consolidating Sno Falls Shares

No Longer Use Share

Other (Please add a comment below)

Have you been happy with our service?

Yes

No (please add comment below)

### COMMENTS

I understand that by closing my share with Sno Falls Credit it is my responsibility to update direct deposits or other electronic or automated transactions that use this share; Debit card(s) associated with this share will be deactivated; Outstanding checks may be returned; and Online Banking and Bill Pay will no longer be available for this share.

Signature:

Date:

For Internal Use Only		
Closed By:	Teller Number:	Date:

Please return the completed form to [info@snofalls.com](mailto:info@snofalls.com) or visit one of our branch locations.