

Request to Close Account

Account No:				Date:	
Account Owner:			Last 4 of SSN:	D.O.B.:	
Address:	City	:	State:	Zip:	
Phone:	-		Work Phone:	,	
PLEASE BE AWARE OF	THE FOLLOW	ING:			
 All loans or lines of credit must be satisfied and closed if closing entire account. All credit cards must be satisfied and closed if closing entire account. You are not required to close your accounts just because you are no longer employed by FedEx. 					
ACCOUNTS TO CLOSE	::				
Share / Savings	Share Certificate	Share Draft (C	Checking)	Business Checking	
Christmas Club	Vacation Club	Money Marke	et 🔲 IRA		
ATM/Debit Card	Credit Card	Line of Credit	t Mortgage		
Secondary Savings	Bill Pay				
REASONS FOR CLOSING ACCOUNT:					
Consolidation of FECA accounts	Consolidation of accounts elsewh	ere Denied Ioan		Fees charged	
Inconvenient locations	☐ Moving out of st	ate Need par fund	ds on hold	☐ No longer a FedEx employee	
Paid off loan	Poor service	Deposit rates		Loan rates	
Other:					
Signature:				Date:	

Complete all fields and return to CloseAccount@fecca.com.