

Closed Account Questionnaire

Name: _____

Account Number(s): _____

Date: _____

On behalf of the Board of Directors, management and staff, we are regretful that you, our valued Member, are receiving this form. We would appreciate your honest feedback on the reason(s) you are changing financial institutions, this will allow management to improve our institution for the better. Please complete or give our staff member the information to complete the area(s) that apply below.

- Moving/Location _____
- Doesn't use Account
- Consolidated with another MCCU account
- Possible Fraud
- Products & Services
- Member Service
- Deceased
- Closed by CU – Return Mail Fees
- Closed by CU – Dormant
- Closed by CU – Collections
- Closed by CU-Online Never Funded *(be sure to use this reason code too)*
- Closed by CU-Online -Not Compliant *(be sure to use this reason code too)*

Please explain any other reason you are closing your account, and anything we can do, or could have done to prevent this?

Member Signature: _____