Authorization to Close Accounts

To:	Date:
(Bank Name)	
(Street Address)	_
(City, State, Zip)	_
RE: Account Closure	
Dear Service Provider:	
Please close the following institution:	g accounts that I have with your financial
	□ Checking □ Savings □ Other:
Account Number	□ Checking □ Savings □ Other:
Account Number	□ Close Immediately □ Close at Maturity (/ /)
	us financial institution may charge a fee for early closing of any Certificates of Deposit.
Please send any funds ren	naining in these accounts to (select one):
(Customer Name)	
(Customer Address)	
(Customer City, State, Zip)	
☐ The following financial in	nstitution:
L'Oreal USA Federal Credit U	
30 L'Oreal Way	Account Holders Name
Clark, NJ 07066	Account#
Thank you for your prompt	attention to this matter.
Customer Signature (Account Holder)	Date
Then personally appeared before and acknowledges for foregoing in	me and nstrument to be his/her/ their free act deed, before me.
Notary Public Signature/ Seal	Date

Switching Account "To Do" List

- Making it easy to switch your accounts to L'Oreal USA Federal Credit Union.

1.	Have your 5 digit account number ready when transferring your accounts	; .
	Account Number:	
	Routing Number: 221274932	
2.	Options to explore	
	 □ Refinance your auto loan with L'Oreal USA FCU □ Consolidate your Credit Cards with L'Oreal USA FCU □ Refinance your personal loan with L'Oreal USA FCU 	
3.	Switch Direct Deposits and Automatic deposits	
	 □ Employer Deposit □ Government Deposit □ Social Security Administration □ Bill Payments □ Brokerage Deposits □ Child Support □ Other 	

For additional information- or help switching your accounts to the L'Oreal USA Federal Credit Union feel free to contact us. We're always glad to help. Please visit any branch office or call **732-499-6679** or **501-955-8815** in Arkansas.



30 Terminal Ave Clark, NJ 07066 ◆ 732.499.6679 ◆ 501.955.8815 ◆ Fax 732.574.9148 ◆ www.lorealusafcu.com