



Account Close Form

Please close my account number _____ . Please mail any proceeds of this account to the following address:

Please indicate your current phone number: _____

I have a KEMBA VISA Debit Card? ____ Yes ____ No

I used KEMBA Online Bill-Pay? ____ Yes ____ No

Signature: _____ Date: _____

Instructions: Complete and sign above and return to us

By e-mail: info@kembafcu.org

By text: 540-525-0931

By Fax: 540-387-2854 (Salem Branch) 434-846-2058 (Lynchburg Branch)

By Mail: 2812 West Main Street, Salem, VA 24153