



PREMIER
COMMERCIAL BANK

MOVE YOUR DEPOSIT ACCOUNT

Authorization to transfer account balance (provide to closing institution)

On _____ 200__, please close account # _____

at _____ (closing financial institution).

Account holder(s) name: _____

Social Security # _____ - _____ - _____

Social Security # _____ - _____ - _____

I (we) have opened a checking account at Premier Commercial Bank. On the closing date, please send remaining funds to:

_____ Premier Commercial Bank
PO Box 10948
Greensboro, NC 27404

OR

_____ mail to me at this address:

X _____

X _____