

NOTICE OF CLOSURE OF MUTUAL ASSOCIATION BRANCH

_____ (*bank name*) is providing a 30-day notice to mutual association customers of the intent to close the following mutual association branch.

Address: _____

City: _____ State: _____ ZIP: _____

Effective date of closure: _____

Optional:

Customers may use the [fill in the blank, ie, drive up at location, branch at location, or ATM at location]