

Request to Cancel Joint Credit Account

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Credit Card Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Credit Card Company],

I am writing to formally request the cancellation of my joint credit account with account number [Insert Account Number], which is held in the names of [Your Name] and [Co-Holder's Name]. After careful consideration, we have decided to close this account.

Please confirm the cancellation of this account, and ensure that no further transactions can be made. Additionally, I would appreciate a written confirmation stating that the account has been closed and that any outstanding balance has been paid off.

Should you require any further information or documentation to process this request, please do not hesitate to contact me at the phone number or email address listed above.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]