Your Name Your Address City, State, Zip Code Email Address Phone Number Date

Credit Card Issuer's Name Customer Service Department Issuer's Address City, State, Zip Code

Subject: Request for Credit Card Account Closure

Dear Customer Service Team,

I am writing to formally request the closure of my credit card account with your institution, as I have paid off the balance in full. My account number is XXXX-XXXX-XXXX.

I would appreciate your confirmation of the account closure and any final statements that may be necessary.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely, Your Name