

The University of Connecticut
Student Activities Banking Services
Student Organizations Fund

ACCOUNT CLOSE FORM

Organization Name: _____

Organization #: _____ **Closing Amount: \$** _____

*If there is an account balance, a completed Disbursement Request must accompany this form to bring the balance to \$0.00.
Use account code #631 (unless money is going toward something specific), and indicate in the description*

The SABS staff is constantly striving to provide great service for student organizations. Please answer the following questions in order to help us better assist other student organizations in the future.

Why are you closing your account?

Where will you be keeping your money in the future?

What additional banking services could be provided by SABS to better assist you in managing your organization's finances?

Do you have any other comments/suggestions?

I hereby authorize SABS to close our account and understand that our organization will be responsible for any checks that are returned from the bank uncollected (bounced checks). I also understand that by closing our account, we will no longer have access to financial tools (receipt books, etc.) and event supplies (cash boxes, tickets, etc.) provided by SABS to account holding organizations.

Officer Name: _____ **Net ID:** _____

Title: _____ **Date:** _____

SABS Use Only

Processed By: _____

Transaction # _____

Make a copy of Account Close Form and attach it to the SOF copy of the closing disbursement.

Restrict the account in the SOFA DB using Account Closed and make a note "CLOSED on XX/XX/XX". Enter Account Closed date and change Account Status to *Closed* in the SABS Organization List.

Save the Account Close Form in R:\Business Office\Unopened Accounts\Closed Accounts\FYxx Close Account Forms.