

TERMINATION OF: INTEREST IN SUPERVISED BANK ACCOUNT

The undersigned has no further interest in any funds in the supervised bank account between _____

_____ and the undersigned under the Deposit Agreement dated _____, _____.

You are hereby authorized to close the account insofar as the undersigned is concerned.

UNITED STATES OF AMERICA

(Account Number)

(Date)

(Date)

(Agency Official)

(Agency)

(Name of Other Lender or Grantor (If Involved))

BY _____

(Official Title)