

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Phone Number]  
[Email Address]

[Date]

[Financial Institution Name]  
[Department Name, e.g., Retirement Services]  
[Address]  
[City, State, Zip Code]

**Subject: Request for Total Distribution and Account Closure - IRA Account #[Your Account Number]**

To Whom It May Concern,

Please accept this letter as formal authorization to close my Individual Retirement Account (IRA) referenced above. I am requesting a direct rollover of the full balance of this account into another qualified retirement plan.

**Distribution Instructions:**

- **Distribution Type:** Direct Rollover (Liquidate all assets)
- **Account Type:** [Traditional IRA / Roth IRA]

**Payment Instructions:**

Please issue a check for the total remaining balance, including all accrued interest, made payable to the successor custodian as follows:

[New Financial Institution Name]  
FBO [Your Name]  
[New Account Number]  
[Mailing Address for the New Institution]

Please mail the check directly to [the address above / my home address].

I understand that any applicable closing fees may be deducted from the final balance. Once the funds have been transferred, please close the account immediately and provide written confirmation of the closure and the final distribution amount for my tax records.

If you require any additional forms or information to complete this request, please contact me at [Your Phone Number].

Sincerely,

[Your Signature]

[Your Printed Name]