

[Date]

[Bank Name]

[Bank Address]

[City, State, Zip Code]

Subject: Confirmation of Closed Accounts for Audit Purposes

Dear Bank Manager,

In connection with the audit of our financial statements for the fiscal year ending [Date], please confirm directly to our auditors the details of the account(s) listed below which were closed during the year.

Auditor Information:

[Auditor Name]

[Audit Firm Name]

[Auditor Address]

Closed Account Details:

- **Account Name:** [Company Name]
- **Account Number:** [Account Number]
- **Date of Closure:** [Date]
- **Balance at Date of Closure:** [Amount]

Please confirm the following information regarding the account(s) mentioned above:

1. The date on which the account was officially closed.
2. The amount of the final balance and the disposition of those funds.
3. Whether any remaining liabilities or obligations exist between our company and your institution regarding these accounts.

Please mail the completed confirmation directly to our auditors at the address provided above. A self-addressed envelope may be enclosed for your convenience.

Sincerely,

[Authorized Signature]

[Typed Name]

[Title/Position]

[Company Name]