

Date: [Insert Date]

Recipient Name: [Insert Account Holder Name]

Address: [Insert Address]

Account Number: [Insert Account Number]

Subject: Notice of Account Closure due to Statutory Expiration

Dear [Insert Name],

This letter serves as formal notification that your account referenced above has been scheduled for closure effective [Insert Date].

This action is being taken in accordance with [Insert Specific Statute/Law Name], which mandates the closure of accounts that have reached the maximum statutory period of [Insert Time Period, e.g., inactivity/term limit].

Final Balance Details:

As of the date of this letter, your remaining balance is [Insert Amount].

Action Required:

Please provide instructions for the disbursement of your remaining funds by [Insert Deadline Date]. If no instructions are received by this date, the funds will be handled in accordance with state unclaimed property laws and may be transferred to the [Insert State/Department Name].

If you have questions regarding this notice or believe this closure is in error, please contact our compliance department at [Insert Phone Number] or [Insert Email Address] immediately.

Sincerely,

[Your Name/Signature]

[Your Title]

[Organization Name]