



WRITTEN STATEMENT OF UNAUTHORIZED DEBIT (ACH)

Member/Transaction Information:

Name: _____ Account # _____

Amount of Debit: _____ Date of Debit: _____

Party Debiting the Account: _____

Statement

I (the undersigned) hereby attest that (i) I have reviewed the circumstances of the above electronic (ACH) debit to my account, (ii) the debit was not authorized, and (iii) the following, to the best of my ability to identify, is the reason for that conclusion:

_____ I authorized the party listed above to originate one or more ACH entries to debit funds from my account, but on _____, 20____ I revoked that authorization by notifying _____ in the manner specified in the authorization.

_____ I do not know or did not authorize the party listed above to debit my account.

_____ The amount debited from my account was different from what I authorized. The amount I authorized the above-named company to debit was \$ _____.

_____ The date the above-named company debited my account was different from what I authorized. I authorized the debit to be made no earlier than _____, 20____.

_____ The above-named company improperly reinitiated the listed debit(s).

_____ The intended payee was not credited.

_____ My check was improperly processed electronically.

_____ Both the source document and the electronic entry to which it relates have been presented for payment.

Additional information _____

I am an authorized signer, or otherwise have authority to act, on the account identified. I attest that the debit above was not originated with fraudulent intent by me or any person acting in concert with me. I have read this statement in its entirety and attest that the information provided on this statement is true and correct.

MEMBER SIGNATURE: _____ Date: _____

OFFICE USE ONLY

DATE/TIME RECEIVED: _____

EMPLOYEE SIGNATURE _____