



Written Statement of Unauthorized Debit (ACH)

1. Account/Transaction Information

Member's Name: _____
 Account Number: _____
 Amount(s) of Debit: _____
 Date(s) of Debit: _____
 Party Debiting the Account: _____

Multiple unauthorized debit amounts and correspondent dates from the same debiting party can be listed on the same form; however, a separate form must be completed if there are multiple debiting parties.

2. 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 or improper, and (iii) the following, to the best of my ability to identify, is the reason for that conclusion:

- I did not authorize the party listed above to debit my account. (ACH staff: R10)
- I revoke the authorization I had given to the party to debit my account before the debit was initiated.
- My account was debited before the date I authorized. (ACH staff: R10)
- My account was debited for an amount different than I authorized. (ACH staff: R10)
- My check was improperly processed electronically. (ACH staff: RCK=51, POP, ARC and BOC=R10)
- Both the check and the ACH entry posted to my account. (ACH staff: RCK=R53, ARC, POP and BOC=R37)
- Other (must specify) (ACH staff: Incomplete Transaction R10)

3. Signature

I am an authorized signer, or otherwise have authority to act, on the account identified in this statement. 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's Name: _____

Member's Signature: _____

Date: _____

Employee's Initials:	Date:	EFT Specialist's Initial's:	Date:
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