



(888) 354-6228
www.orangecountyscu.org

Written Statement of Unauthorized (ACH) Debit/Credit

Please use a separate sheet for each merchant

Account/ Transaction Information					
Member Name		Member Number		Merchant Party Debiting/Crediting the Account	
Transaction Amount #1	Date	Transaction Amount #2	Date	Transaction Amount #3	Date

Statement
<p>I, _____, hereby certify that I have reviewed the circumstances of the above electronic (ACH) debit/credit to my account, the debit/credit was not authorized, and the following, to the best of my ability to identify, is the reason for that conclusion:</p> <p><input type="checkbox"/> I did not authorize the party listed above to debit/credit my account. (Permanent stop will be placed on merchant)</p> <p><input type="checkbox"/> I authorized _____ to originate one or more ACH entries to debit/credit funds from my account, but on _____ I revoked that authorization by notifying in the manner specified in the authorization. (Permanent stop will be placed on merchant)</p> <p><input type="checkbox"/> My account was debited/credited before the date I authorized.</p> <p><input type="checkbox"/> My account was debited/credited for an amount different than I authorized.</p> <p><input type="checkbox"/> My check was improperly processed electronically.</p>

I am an authorized signer, or otherwise have authority to act, on the account identified in this statement. I certify that the debit/credit 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 certify that the information provided on this statement is true and correct.

Member Signature

Date

FOR CREDIT UNION USE ONLY

Associate Name	Teller Number	Date
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IMAGE DOCUMENT

MBR #	Orig. Date	Doc Class EFT – ACH Return Items	Dept EFT
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