

# Arapahoe Credit Union

---

## Written Statement of Unauthorized ACH Debit Account / Transaction Information

Member Name

Account Number & S Type

Transaction Amount

Transaction Date

Company Debiting the Account

Employee Initials

### Statement

I hereby attest that (1) I have reviewed the circumstances of the above electronic ACH debit to my account, (2) the debit was not authorized, and (3) the following, to the best of my ability to identify, is the reason for that conclusion:

\_\_\_ I did not authorize the company listed above to debit my account.

\_\_\_ I did authorize the company listed above to debit my account. However, the transaction is incorrect due to the following \_\_\_\_\_.

\_\_\_ I revoked the authorization I had given to the company to debit my account before the debit was initiated.

\_\_\_ My account was debited before the date I authorized.

\_\_\_ My account was debited for an amount different than I authorized.

\_\_\_ My share draft or check was improperly processed electronically.

\_\_\_ I wish to stop this debit ONE TIME.

This stop will expire \_\_\_\_\_, 20\_\_ which covers no more than 1 transaction out of my account. (Oral Request automatically expires after 14 days, if written request is not received.)

\_\_\_ Other (Please describe your reason in detail)

---

---

---

I understand my account will be debited a \$ \_\_\_\_\_ fee for this request.

### Signature

I am an authorized signer, or otherwise have authority to act, on the account identified in this statement. I attest that the debit transaction 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.

Signature \_\_\_\_\_ Date \_\_\_\_\_

