



(888) 354-6228  
www.orangecountyscu.org

## Written Statement of Unauthorized (ACH) Debit/Card

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. <b>(Permanent stop will be placed on merchant)</b></p> <p><input type="checkbox"/> I authorized _____ (company name) to originate one or more ACH entries to debit/credit funds from my account, but on 20____ I revoked that authorization by notifying in the manner specified in the authorization. <b>(Permanent stop will be placed on merchant)</b></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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