



Written Statement of Unauthorized / Revoked / Improper Debit Activity

I. Account/Transaction Information

Name:
Account Number:
Amount of Debit: \$
Date of Transaction:
Transactor Debiting Account:

II. Statement

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

- [ ] Stop further transactions from this company. \$25 processing fee
[ ] I did not authorize the party listed above to debit my account.
[ ] My account was debited before the date I authorized.
[ ] My account was debited for an amount different than I authorized.
[ ] I revoked the authorization I had given to the party to debit my account before the debit was initiated. \$25 processing fee.
[ ] My check was improperly processed electronically.
[ ] Other (must specify). \$25 processing fee.

III. Signature

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

I agree to hold Midwest Coalition of Labor Credit Union (MCLCU) harmless for the amount, expenses, and costs incurred by the above party for refusing payment. I also understand that this signed form must be returned to Midwest Coalition of Labor Credit Union within 10 days from the date listed below in the Credit Union Section or this form will become void.

Date: Signature:

Mail to: Midwest Coalition of Labor Credit Union
6240 Joliet Rd
Countryside, Illinois 60525
Fax to: (708) 482-9622

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For Credit Union Use Only

Date: [ ] Returned through Alloya (if applicable) [ ] Credited account G/L 818.00 (if applicable)
[ ] Blocked Group Code: [ ] Fee charged (if applicable) [ ] Employee Initials: