



Written Statement of Unauthorized ACH Debit

Member Name: _____ Account Number: _____

Merchant Name: _____ Amount of Debit: _____

Date of Debit: _____

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 did not conform to the terms of my authorization; and (iii) the following, to the best of my ability to identify, is the reason for that conclusion.

(Please select ONE):

Fraud

I do not know and did not authorize the merchant to debit my account

*Your account will be restricted, preventing any and all debits from clearing. An account closure is advised. Please visit your local branch to further discuss opening new account/s.

Dispute

I authorized the merchant listed above to debit my account, but the amount does not conform to the authorization:

- My account was debited before I authorized
- My account was debited for an amount different that I authorized
- Duplicate payment
- My check was improperly processed

I revoked authorization from merchant listed above:

- I revoked the authorization I had given to the party to debit my account before the debit was initiated

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.

Signature (**Required**): _____ Date: _____

Please send completed form to memberservices@smartcu.org