



## Written Statement of Unauthorized ACH Debit/Credit

(Please use a separate sheet for each merchant)

Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

Originating Company Name: \_\_\_\_\_

Transaction Amount: \$ \_\_\_\_\_ Posting Date: \_\_\_\_\_  Debit /  Credit

I (the undersigned) hereby attest that (i) I have reviewed the circumstances of the above electronic ACH transaction to my account, (ii) the transaction was not authorized, and (iii) 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/credit my account
- I revoked the authorization I had given to the company listed above to debit/credit my account before the transaction was initiated in accordance with my agreement with such company.
  - I wish to stop any future debits/credits connected with this revoked authorization
- My account was debited/credited before the date I authorized
- My account was debited/credited for an amount different from what I authorize
- My check was improperly processed electronically
- Incomplete Transaction: My account was debited, but the corresponding payment was not credited to my account with the company listed above
- I did authorized the company listed above to debit my account, but they have reinitiated this debit to my account more than two times

I am an authorized signer, or otherwise have authority to act, on the account identified in this statement. I attest that the 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 is true and correct.

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

Return completed form in person to a Sacramento Credit Union branch, by fax: 916-449-2785, or by mail: Sacramento Credit Union, P.O. Box 2351, Sacramento, CA 95812-2351