



**SACRAMENTO**  
CREDIT UNION

## Written Statement of Unauthorized ACH Debit/Credit

(Please use a separate sheet for each Merchant)

### 1. Account/Transaction Information

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

Party Debiting/Crediting Account: \_\_\_\_\_

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

### 2. Statement

I (the undersigned) hereby attest that (i) I have reviewed the circumstances of the above electronic (ACH) debit/credit to my account; (ii) the debit/credit 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.

#### I did not authorize the debit/credit to my account.

- ☐ I do not know or did not authorize the party listed above to debit/credit my account.
- ☐ My check was improperly processed electronically.

#### I authorized the party listed above to debit/credit my account, but:

- ☐ I revoked the authorization I had given to the party to debit/credit my account before the transaction was initiated.
- ☐ I wish to stop any future debits/credits connected with this revoked authorization.

#### I authorized the party listed above to debit/credit my account, but the entry does not conform to the terms of my authorization.

- ☐ My account was debited/credited before the date I authorized.
- ☐ My account was debited/credited for an amount different from what I authorized.
- ☐ A debit/credit to my account was an improper reversal.
- ☐ Incomplete Transaction: My account was debited by an authorized third party, but that third party failed to make my payment as instructed.
- ☐ A debit to my account that was previously returned was improperly reinitiated to my account more than two times.

### 3. Signature

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

Any intentional attempt to obtain money from a financial institution by misrepresenting whether a transaction was authorized may result in the imposition of fines up to \$1,000,000, or imprisonment up to 30 years, or both under the provisions of Federal law (18 U.S.C. §1344).

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