



Written Statement of Unauthorized Debit (ACH)

Form may be returned by fax to 770-420-3850

State of _____

Member Account # _____

County of _____

Daytime Telephone # _____

I, _____, state that I have examined my statement or other notification from LGE Community Credit Union indicating that an ACH (electronic) debit entry was charged to my account on _____ (date) in the amount of \$_____, and that the debit was unauthorized or improper.

I have multiple unauthorized entries for the same company. (If additional space is needed, please use back of form)

Date _____ Amount _____

Date _____ Amount _____

I want to stop payment on all future payments from this company and have completed an ACH Stop Payment Request to accompany this Written Statement of Unauthorized Debit (there is a **one-time, \$30.00 fee** to place an ACH Stop Payment).

This entry was / These entries were (Please select one):

- Unauthorized** complete *section I and section III*
- Revoked** prior to this payment posting, by notifying the company in the manner specified in the agreement. Complete *section I and section III*
- Improper** (a check improperly converted to ACH) complete *section II and section III*.

Section I: Unauthorized and Revoked Entries: I further state that: (check one)

- I did not authorize, and have not ever authorized, _____ (company) to originate one or more ACH entries to debit funds from any account at this financial institution. (R10 or R05)
- I authorized _____ (company) to originate one or more ACH entries to debit funds from my account, but on _____ (date) I **revoked** that authorization by notifying the company in the manner specified in the authorization. (R07)
- I authorized _____ (company) to originate one or more ACH entries to debit funds from my account but:
 - The amount debited is different than the amount I authorized to be debited. The amount I authorized is _____. (R10)
 - The debit was made to my account on a date earlier than the date on which I authorized the debit to occur. I authorized the debit to be made to my account on or no earlier than _____ (date). (R10)
 - I did not authorize the specific payment referenced above. (R10)
 - The Originator, Third-Party Sender or ODFI of the debit Entry failed to make or complete the corresponding payment to the intended third-party payee _____ (company) (R10)

Section II: Improper Entries (Checks ineligible for conversion to ACH or improperly converted): I further state that: (check one)

ARC (Accounts Receivable Entries), BOC (Back Office Conversion) or POP (Point of Purchase)

- Both the check and the ACH entry to which it relates have been presented for payment (R37)
- The amount of the ACH entry was not accurately obtained from the check (R10)
- Notice was not provided by the Originator in accordance with the requirements of the NACHA ACH Operating Rules (R10)
- Improper Source Document (R10)

RCK (Re-presented - NSF - Bounced Check Entries)

- The item to which the entry relates is ineligible to be initiated as an RCK entry (R51)
- The required notice stating the terms of the Re-presented Check Entry policy was not provided by the Originator in accordance with the requirements of the NACHA ACH Operating Rules (R51)
- All signatures on the item to which the RCK entry relates are not authentic or authorized, or the item has been altered (R51)
- The amount of the RCK entry was not accurately obtained from the item (R51)
- Both the RCK entry and the item to which the RCK entry relates have been presented for payment (R53)
- Check paid by other means (R51)

Section III: Signature Required

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

Signature _____ Date _____

LGE Rep (Initials/Teller #) _____ Branch # _____ Date received _____

For ACH Staff Use Only					
Transaction Date	Trace #	Transaction Date	Trace #	Transaction Date	Trace #
Date Received		Returned By (Initials & Teller #)		Date Returned	