

CALIFORNIA COMMUNITY CREDIT UNION
WRITTEN STATEMENT OF UNAUTHORIZED DEBIT (ACH)

ACCOUNT / TRANSACTION INFORMATION

Full Name: _____
Account Number: _____
Amount of Debit: _____
Date of Debit: _____
Party Debiting the Account: _____

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, and (iii) the following, to be best of my ability to identify, if the reason for that conclusion:

- I did not authorize the party listed above to debit my account.
- I revoked the authorization I had given to the party to debit my account before the debit was initiated.
 - I wish to stop any future debits connected with this revoked authorization.
- My account was debited before the date I authorized.
- My account was debited for an amount different that I authorized.
- My check was improperly processed electronically.
- Incomplete Transaction: My account was debited, but the corresponding payment was not credited to my account with the party listed above.
- I did authorize the party listed above to debit my account, but they have reinitiated this debit to my account more than two times.
- Other (specify): _____

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

Date