ADVANTAGE FINANCIAL
FEDERAL CREDIT UNION

Written Statement of Unauthorized Debit (ACH)

1. Account Transaction Information

   Name_____

   Account Number _____

   Amount of Debit_____

   Date of Debit_____

   Party Debiting the Account_____

2. Statement

   I_____ hereby attest that (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 the best of my ability to identify, is the reason for that conclusion.

   _____I did not authorize the party listed to debit my account.

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

   _____My account was debited before the date I authorized.

   _____My account was debited for an amount different than I authorized.

   _____My account check was improperly processed electronically.

   _____other (must specify)_____

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 above was not originated with fraudulent intent by me or any person acting in the 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_____