



Written Statement of Unauthorized ACH Debit

PLEASE PRINT

Account / Transaction Information

Member Name _____
 Account Number _____
 Transaction Amount _____
 Transaction Date _____
 Company Debiting the Account _____

Statement

I hereby attest that (1) I have reviewed the circumstances of the above electronic ACH debit to my account, (2) the debit was not authorized, and (3) the following, to the best of my ability to identify, is the reason for that conclusion:

- _____ I did not and have never authorized the company listed above to debit my account. (R10)
- _____ My account was debited before the date or for an amount different than I authorized.
 Authorized date: ____/____/____ Amount authorized: \$_____ (R10)
- _____ I revoked an authorization I had previously given to the company to debit my account before the debit was initiated.
 Date authorization was revoked: ____/____/____ (R07)
- _____ This is a duplicate entry to my account which was previously posted on: ____/____/____ (R24)
- _____ I never issued this check that was converted to an ACH entry or I issued it for a different amount. Amount issued for: \$_____ (R51)
- _____ This item was previously presented for payment as a check on: ____/____/____ (R53)
- _____ Other (Please describe your reason in detail): _____

Please read each of the following statements and sign below:

Financial institutions are limited to the time frame in which an unauthorized/improper ACH debit can be returned back to the Originator. For personal accounts, the unauthorized/improper ACH debit must have been posted to your account within the last 60 calendar days. For all unauthorized/improper ACH debits older than 60 calendar days you will have to contact the originator directly to dispute the ACH debit(s). NO EXCEPTIONS.

For business accounts, the unauthorized/improper ACH debit must have been posted to your account within the last 24 hours.

Signature

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

Member Signature _____ Date _____

Fitzsimons Rep Signature _____ Teller # _____ Date/Time Received _____

FOR ACCOUNTING USE ONLY:

Entered By: _____ Template#: _____ Teller #: _____ Date: _____ Verified By: _____