

Synergy Federal Credit Union
Written Statement of Unauthorized Debit (ACH)

1. Account / Transaction Information

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

2. Reason for Return

- UNAUTHORIZED DEBIT TO CONSUMER ACCOUNT USING CORPORATE SEC CODE (CCD OR CTX) (R05)**
- AUTHORIZATION REVOKED BY CUSTOMER (R07)**

I previously authorized the above said company to debit my account but revoke my authorization in the manner specified by above named company.

CUSTOMER ADVISES NOT AUTHORIZED, IMPROPER, INELIGIBLE, OR PART OF AN INCOMPLETE TRANSACTION (CHECK ONE BELOW) (R10)

- I did not authorize the party listed above to debit my account from the above listed entry(ies).
- My account was debited for an amount different than I authorized. The amount I authorized the above named company to debit was \$ _____
- The date the above named company debited my account was different than what I authorized. I authorized the debit to be made no earlier than _____
- The authorization was not clear and understandable.
- The source document used for the entry (ARC, BOC, or POP) was not an eligible source document.
- The intended payee was not credited. (Incomplete Transaction)
- The above named company improperly reinitiated the listed debit(s).

- THE SOURCE DOCUMENT (ARC, BOC, OR POP) WAS PRESENTED FOR PAYMENT (R37)**

THE ITEM TO WHICH THE RE-PRESENTED CHECK (RCK) ENTRY RELATES IS INELIGIBLE OR THE RCK ENTRY IS IMPROPER FOR ONE OF THE FOLLOWING REASONS: (R51)

- The required notice stating the Re-Presented Check Entry policy was not provided by the Originator listed above.
- The check is ineligible.
- All signatures on the check are not authentic or authorized, or the check has been altered.
- The amount of the entry was not accurately obtained from the item.

- THE ITEM AND THE RE-PRESENTED CHECK (RCK) ENTRY HAVE BOTH BEEN PRESENTED FOR PAYMENT. (R53)**

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 concert with me. I have read this statement in its entirety and attest that the information provided on this statement is true and correct.

Date Member Signature Print Name

Date Financial Institution Representative Signature Print Name