



P.O. Box 2270
Germantown, MD 20875-2270

WRITTEN STATEMENT OF UNAUTHORIZED DEBIT
For Consumer ACH Debits Only

1. ACCOUNT/TRANSACTION INFORMATION

Name _____
Account Number _____
Company Debiting the Account _____

Amount of Debit(s)	Date of Debit(s)
_____	_____
_____	_____
_____	_____
_____	_____

2. STATEMENT

I (the undersigned) hereby **attest** that (i) I have reviewed the circumstances of the above electronic (ACH) debit to my account, and (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 company listed above to debit my account.
- I revoked the authorization I had given to the company to debit my account before the debit was initiated. * MAFCU may request proof of your revocation*
- My account was debited before the date I authorized.
- My account was debited for an amount different than I authorized.
- My check was improperly processed electronically.
- Both the check and the ACH entry posted to my account.
- 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 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: _____ Signature: _____
Telephone: _____