

## Member FDIC | Equal Housing Lender Privacy Statement

## Written Statement of Unauthorized Electronic (ACH) Debit

First Name:		Last Name:	
Submitted on:			
Customer name/address (required)	Customer name  Customer address  City, State, Zip		
Transaction information (required)	Debited account number  Amount of Debit  Date of debit  Payee (Party Debiting the Account)		
Statements I, the undersigned, hereby state all of the following: I am an authorized signer or otherwise have the authority to act on the debited account described above. I have reviewed the circumstances of the electronic debit to the account, as described above. I have concluded the debit was not authorized. The debit was not originated with fraudulent intent by me or any person acting in concert with me.			
The following, to the best of my knowledge, is the reason for that conclusion:			
Date transaction authorized if the transaction was debited before authorized.			
The amount authorized if the amount of the transaction was different from the amount I authorized.			

Other information (if you chose the reason as OTHER above):			
I have read the above statements in their entirety and certify that the statements and information provided are true and correct.			
Today's date			
Place (City)			
County or Parish:			
State			
For Financial Institution Internal Use Only:			
Date Financial Institution first notified:			
Received by:			