



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	<input type="text"/>	
	Customer address	<input type="text"/>	
	City, State, Zip	<input type="text"/>	
Transaction information (required)	Debited account number	<input type="text"/>	
	Amount of Debit	<input type="text"/>	
	Date of debit	<input type="text"/>	
	Payee (Party Debiting the Account)	<input type="text"/>	
<p>Statements</p> <p>I, the undersigned, hereby state all of the following:</p> <ul style="list-style-type: none">• 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:	<input type="text"/>		
Date transaction authorized if the transaction was debited before authorized.	<input type="text"/>		

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: _____	