Written Statement of Unauthorized Debit
For Unauthorized, Improper, or Revoked ACH Transaction

Please complete this form for unauthorized, improper, or revoked ACH/Electronic Fund Transfer debit entries being deducted from your account. Pursuant to ACH Rules, this form must be completed in sufficient time to return the entry indicated below **before 60 days from the day the statement that included the transaction was mailed**. Completion of this form does not guarantee that the company will stop debiting your account. You may complete one form for multiple returns to the same company/merchant.

***If this is an item that has already been paid directly to the merchant, please provide proof of payment.**

Print Member Name	Daytime Phone	Account Number & Share ID

Amount of ACH Item $	Company Name (as listed in the detail of the account)	Date of ACH Entry

Do you want to place a Stop Payment?($15 Fee) ❒ YES ❒ NO	You must notify the Credit Union, orally or in writing, up to three (3) business days before the scheduled transfer date. Stop payment orders, verbal, written, or via Online Services, will stay in effect until the return of the debit or written notice to cancel the stop payment is received from the account owner. The stop order for a one-time or recurring ACH will apply to all future debits and credits originating from another party.

I (the undersigned) hereby attest that (i) I have reviewed the circumstances of the above electronic (ACH) debit to my account, (ii) the debit was not authorized, and (iii) the following, to the best of my ability to identify, is the reason for that conclusion.

For **Unauthorized** or **Revoked** debit entries, I further say that (please check one):

- ❑ I did not authorize, and have not ever authorized, _____ to initiate one or more ACH entries to debit funds from this account at Qualstar Credit Union.
- ❑ I authorized _____to initiate one or more ACH entries to debit funds from my account at Qualstar Credit Union, but:
  - ❑ The amount debited is different than the amount I authorized to be debited.
  - ❑ The debit was made earlier than the date on which I authorized the debit to occur.
- ❑ I authorized _____ to initiate one or more ACH entries to debit funds from my account, but on _____, 20 __ I revoked that authorization by notifying _____ in the manner specified in our agreement, or by making the full payment (receipt attached.)

For **Improper** electronic check entries, I further say that (please check one):

- ❑ The notice stating the terms of the Originator's re-presented check entry policy or converted check entry policy was not provided to me prior to the date the debit entry posted to my account.
- ❑ The signatures on the check related to the debit are not authentic or authorized.
- ❑ The check related to the debit has been altered.
- ❑ In the case of a mailed lockbox payment, I notified the Originator not to convert my check.
- ❑ The check related to the debit was paid from my account, as well as the ACH debit.

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 agree that a copy of this statement may be provided to the above company or their originating deposit financial institution, if requested. I have read this statement in its entirety and attest that the information provided on this statement is true and correct.

Member Signature	Date

Please return to Qualstar Credit Union:
PO Box 3050 • Bothell, WA 98041-3050 • (800) 848-0018