



**WRITTEN STATEMENT OF UNAUTHORIZED DEBIT**

I, \_\_\_\_\_, attest that I have examined the attached statement or other notification from UTELCU indicating that an ACH debit entry was charged to my Account # \_\_\_\_\_ on \_\_\_\_\_ in the amount of \$ \_\_\_\_\_, and the debit was unauthorized. This debit has occurred in the past sixty (60) days.

An unauthorized debit means an electronic funds transfer from a consumer's account initiated by a person which was not authorized by the consumer in writing, by telephone, internet, or electronic check to initiate a transfer. An electronic funds transfer in an amount greater than that authorized by the consumer, or which results in a debit to a consumer's account earlier than that authorized by the consumer, is also an unauthorized debit. An unauthorized debit does not include electronic funds transfer initiated with fraudulent intent by the consumer or any person acting in concert with the consumer.

I further depose and say that: (Check One)

\_\_\_\_\_ I did not authorize, and have not ever authorized, \_\_\_\_\_ to originate one or more ACH entries to debit funds from my account at UTELCU.

\_\_\_\_\_ I authorized \_\_\_\_\_ to originate one or more ACH entries to debit funds from my account, but on \_\_\_\_\_ I revoked that authorization by notifying said company in the manner specified in the authorization.

\_\_\_\_\_ I authorized \_\_\_\_\_ to originate one or more ACH entries to debit funds from my account at UTELCU but:

\_\_\_\_\_ The amount debited exceeds the amount I authorized to be debited. The amount I authorized to be debited is \$ \_\_\_\_\_.

\_\_\_\_\_ The debit was made to my account on a date earlier than the date on which I authorized. The date I authorized the debit to occur is \_\_\_\_\_.

I further depose and say that the debit transaction was not originated with fraudulent intent by me, or any other person acting in concert with me and the signature below is my own proper signature.

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Print Member's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member's Address

\_\_\_\_\_  
City, State

\_\_\_\_\_  
Zip Code