

NORTHROP GRUMMAN FEDERAL CREDIT UNION
879 W 190TH ST. GARDENA, CA 90248
(800) 633-2848

Written Statement of Unauthorized Debit (ACH)

Account/Transaction Information

Member Full Name _____
Account Number _____
Amount of Debit _____
Date Debit Posted to Account _____
Company Debiting the Account _____

Statement

I hereby attest that (1) I have reviewed the circumstances of the above electronic (ACH) debit to my account, (2) the debit was not authorized, and (3) 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 recurring payment authorization I had given to the company to debit my account before the debit was initiated.
_____ I wish to stop any future debits connected with this revoked authorization
- _____ My account was debited before the date I authorized.
- _____ My account was debited for an amount different from what I authorized.
- _____ My share draft or check was improperly processed electronically.
- _____ Other (Please describe your reason in detail. The reason must comply with the NACHA Operating Rules.) _____

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.

Signature _____
Date _____

FOR OFFICIAL USE ONLY:

Date Received _____ Received By _____