

STATE COLLEGE FEDERAL CREDIT UNION
724B S ATHERTON ST
STATE COLLEGE, PA 16801

STOP PAYMENT AUTHORIZATION FOR CHECKS AND ACH TRANSACTIONS

Per the terms and conditions below, the undersigned account holder(s) hereby instructs State College FCU to stop payment on the transaction(s) indicated below:

ACH/Electronic Check Check/Share Draft

Request made: Written Verbal Renewal Cancel Stop Payment

Date of Request: _____ Time: _____ AM _____ PM _____

Member Account #: _____ Account Type: Checking Savings

Name(s) on Account: _____

Payable To/Originator: _____ Amount: _____

Expected Clearing Date(s): _____ Check Serial Number: _____

Reason for Stop Payment: _____

Select **ONE** of the following:

Single Stop Entry Stop Multiple Entries* Stop ALL future ACH Debits under a specific authorization

*Multiple Entries means stopping more than one check to the same payee, or stopping more than one debit from the same Originator (but not ALL future debits from that Originator). If this stop payment order instructs State College FCU to stop all future ACH debits pursuant to a specific authorization involving a specific Originator, account holder must initial here to indicate that they have contacted the Company to revoke the authorization. Account holder agrees to provide a copy of the revocation of authorization to State College FCU upon request.

Initials

A Fee of \$ _____ will be assessed to the account holder as payment for implementing this order.

I HAVE READ AND ACCEPT THE TERMS AND CONDITIONS BELOW. I FURTHER AGREE THAT THE TRANSACTION(S) DESCRIBED ABOVE WAS NOT ORIGINATED WITH FRAUDULENT INTENT BY ME OR ANYONE ACTING IN CONCERT WITH ME, AND THAT MY SIGNATURE BELOW IS MY OWN PROPER SIGNATURE. I CERTIFY THAT ALL INFORMATION PROVIDED IS TRUE AND CORRECT.

DATE ACCOUNT HOLDER SIGNATURE(S) PRINTED NAME(S) PHONE NUMBER

DATE CREDIT UNION REPRESENTATIVE PRINTED NAME

STOP PAYMENT TERMS AND CONDITIONS

By directing State College FCU to stop payment on the above transaction(s), the account holder agrees that all information provided to State College FCU is accurate and complete, and the credit union is not obligated to honor a stop payment request that does not contain accurate information provided in a timely manner. The account holder agrees to hold harmless and indemnify State College FCU for all expenses, costs and damages incurred by payment of the above item(s) if the account holder has not provided accurate and complete information. **VERBAL STOP PAYMENT ORDERS ARE ONLY BINDING FOR 14 CALENDAR DAYS UNLESS WRITTEN CONFIRMATION IS PROVIDED WITHIN THE 14 DAY PERIOD.**

Stop Payments of ACH/Electronic Check Items Affecting Consumer

Accounts

This stop payment order shall remain in effect until the earlier of: the withdrawal of the stop payment order by the account holder, or the return of the debit entry, or where a stop payment order is applied to more than one debit entry under a specific authorization involving a specific Originating Company, or the return of all such debit entries. For PPD, IAT and recurring WEB entries: 3 banking days advance notice prior to the expected transfer date of the debit entry is required to implement the stop payment request. If the stop payment request is received within 3 banking days of the expected transfer date, State College FCU will attempt to satisfy the request of the account holder, but will not be held liable if sufficient time was not provided. For ARC, TEL, single WEB, RCK, POP and BOC entries: the stop payment request must be provided to State College FCU in such a time and manner as to allow the credit union reasonable time to act on the request and submit the entry.

Stop Payments of ACH/Electronic Check Items Affecting Non-Consumer

Accounts

The stop payment order is effective for 6 months unless it is renewed in writing. The stop payment order must be provided to State College FCU at such time and manner as to allow a reasonable opportunity to act upon the stop payment order and debit entry.

Stop Payments of Check/Share Draft Items

A stop payment order is effective for 6 months and may be renewed for additional 6 month periods by written request to State College FCU within the period during which the stop payment is effective. The stop payment request must be provided to State College FCU in such a time and manner as to allow the credit union reasonable time to act on the request prior to acting on the item.