

Members 1st Credit Union
Affidavit of Unauthorized ACH Debit Activity
Windham County, State of Vermont

NOTE: This affidavit must be completed and returned promptly to Members 1st Credit Union before the Credit Union is able to initiate the return.

I, _____, account # _____ have examined my statement or other notification from Members 1st Credit Union indicating that an ACH debit was charged to my account on _____, 20____, in the amount of \$ _____. The originating company is listed as _____.

I attest that: (check one)

_____ I did not authorize, and have not ever authorized, in writing, the originating company that appears above to debit funds from any account at Members 1st Credit Union.

_____ I authorized the originating company whose name appears above to originate one or more ACH entries to debit funds from my account, but on _____, 20____ I revoked that authorization by notifying the originating company in the manner specified in the authorization.

_____ I authorized the originating company whose name appears above to originate one or more ACH entries to debit funds from an account at Members 1st Credit Union, however, the amount debited exceeds the amount I authorized to be debited. The amount I authorized is \$_____.

_____ The debit was made to my account on a date earlier than the date on which I authorized the debit to occur. I authorized the debit to be made to my account on or no earlier than _____, 20_____.

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

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

Date: _____, 20____ Signature _____

Credit Union Use Only: For use of ARC, POP, POS, PPD, RCK, TEL and WEB. This form CANNOT be completed for corporate entries CCD and CTX. Transaction must be returned so the ODFI receives it no later than the day following the 60th day after settlement of the original transaction.

Affidavit Received _____, 20____ ACH Returned: _____, 20____
R07 _____ R10 _____ Employee processing return _____