

Cheney Federal Credit Union: Stop Payment Order of ACH Debit

| | |
|----------------|-------------------------------|
| Member Name | Merchant (Company) Payable To |
| Account Number | Company ID (if known) |
| Amount | Anticipated Payment Date |

Check Number (if originated as such): ___ -

___ **Stop single transaction only.** *The stop payment order will remain in effect until {1} one payment of the debit entry has been stopped, or {2} until you provide written notice to release the stop payment order. Notify the Company that a stop payment was placed on a single entry and direct them to continue the recurring payments.*

___ **Stop all future transactions.** *I agree that I am requesting the stop of all future transactions from this company. **Cheney FCU** may request the documentation provided to the Company to stop the above transactions.*

Please stop payment on the preauthorized electronic funds transfer shown above. I agree that **Cheney FCU** is only required to act on this stop payment order if the debit is for the exact amount shown above and is received in time for **Cheney FCU** to have a reasonable opportunity to act. Unless an authorized signature appears below, the request was accepted orally and is not binding beyond 14 days from the date of this form. I understand that if I authorize another payment to this company for any amount, I must advise **Cheney FCU** to prevent return of the newly authorized entry. **Cheney FCU** is not responsible for posting or return errors caused by insufficient or inaccurate information.

| | |
|---------------------------|-------------|
| Authorized Signature | Date |
| Verbal Request Received | |
| Date: _____ | Time: _____ |
| By: _____ | _____ |
| Written Request Received: | |
| Date: _____ | Time: _____ |
| By: _____ | _____ |

NOTE: For questions or clarification, please contact the ACH Department. Not valid for ACH Debits that have already posted to the account.