



ACH Written Statement of Unauthorized Debit

Member name

Date

Account number

Phone number

Please select all boxes that apply

I, the undersigned, hereby attest that (1) I have reviewed the circumstances of the listed electronic (ACH) debit to my account, (2) the debit was not authorized, and (3) the following, to the best of my knowledge, is the reason for the error:

- ☐ I did not authorize the company/merchant to debit my account.
- ☐ I revoked the authorization before the debit was initiated.
- ☐ My account was debited before the date I authorized.
- ☐ My account was debited for an amount different than I authorized.
- ☐ My check was improperly processed electronically.
- ☐ My account was debited by an authorized third party, but that third party failed to make my payment as instructed.
- ☐ Other (must specify) _____

Was this incident reported to the police?

- ☐ Yes If yes, police report number _____
- ☐ No

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.

Member signature _____

Please list all unauthorized transactions

Please note: Only transactions from ONE merchant can be entered on a form. If unauthorized debits are from multiple merchants, each one will need to be filed separately.

[illegible]