



255 N. Lone Hill Ave. San Dimas, CA 91773

800.347.CCCU • F:626.915.2210 • info@myCCCU.com • myCCCU.com

Member Information

Member Name		Account Number	Suffix
Daytime Phone		Cellular Phone	

Transaction Information

Company Name		<input type="checkbox"/> I authorized the company to debit transactions from my account.
Date of Last Debit	Amount of Debit \$	

Stop payment (stops transactions for a designated time period)

I would like to place a stop payment on the above company from ____ / ____ / ____ to ____ / ____ / ____
(6 month maximum)

Only for transactions for \$ _____

Any and all amounts from this company

Revoke (stops all future transactions)

Only for transactions for \$ _____

Any and all amounts from this company

Signature

A \$30 stop payment/revoke fee will be charged.

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 X	Date
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You may fax your request to 626.915.2210

For Credit Union Use Only

Issued by: _____ Date: _____

Entered by: _____ Date: _____