

2150 Trade Zone Boulevard, Suite 200, San Jose, CA 95131 Fax (408) 731-4068					
	CREDIT UNION	Attn: ACH Stop Payments	Account Number		
	Account Number				
ACH STOP PA	AYMENT ORDE	R/CANCELLAT	ON (of previous St	top Order)	
You may complete this form	online and print to sign and fax o	or mail as indicated above.			
NEXT DATE OF ITEM	PREV. DATE OF ITEM	AMOUNT OF ITEM	ITEM ORIGINATOR (COMP.	ANY SENDING THE TRANSACTION)	
REASON	PROC. BY		BR.#	FEE \$	
At your request, we will					
stop only the next occu	urrence of this debit - anticipa	ated debit date of:	(mm/dd/yy)		
stop the next (n	umber of debits/payments) _	(frequency of	debits/payments - i.e., weekly, mor	nthly) received from this Originator	
stop all debits from this	s Originator (will stay in place	e until revoked in writing by m	ember)		
ancel previously-place	ed ACH stop payment order				
transfer, and unless the ite you close the account on presented.	em in question has already be which the item(s) is/are draw	een posted to your account.  n, the order will cancel autom	ved at least three banking days bef You must inform us immediately if y atically, and we will return the item the ACH transaction described abo	ou want to cancel this order. If coded "account closed" if it is	
item is posted in spite of the placing this order by phone	hese efforts. The Credit Uni ie, you agree to reimburse th t place an ACH stop paymer	on's liability shall not, in any e e Credit Union for any loss it	vent, exceed the amount of the ACI sustains in honoring your request. received an item from this Originato	H item. By signing below or by	
			AM □PM		
Date of request	Time		AM         PM	equired	