

Canal Ponds Business Park 100 Marina Drive • Rochester, New York 14626 (585) 453-7000 • (800) 836-7328 summitfcu.org

Written Statement of Unauthorized ACH Debit

Account/Transaction Information Member Name: _____ Account Number: _____ Transaction Date: _____ Transaction Amount: _____ Company Debiting the Account: _____ I hereby attest that I have reviewed the circumstances of the above electronic ACH debit to my account, and the debit was not authorized for the reason indicated below: I have never authorized the company listed above to debit my account. I revoked the authorization I had given to the company to debit my account 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 a third party sender, but the corresponding payment to the party to which payment is owed was not completed (incomplete transaction). Intended third party: Other (Please describe your reason in detail) I am an authorized signer, or otherwise have authority to act, on the account identified in this statement. I attest that the debit transaction above was not originated with fraudulent intent by me or any person acting with me. I have read this statement in its entirety, and attest that the information provided on this statement is true and correct. By signing below I am giving The Summit authorization to release any information necessary to resolve this dispute. Signature: