

WRITTEN STATEMENT OF UNAUTHORIZED DEBIT

- **PLEASE** complete one form for each payee company
- Form should be completed with detail and accuracy. *Incomplete forms and errors will delay your credit back.*

Automated Clearing House (ACH) rules state that a **Written Statement of Unauthorized Debit** must be obtained before an unauthorized debit may be returned.

To expedite your request, please return the completed form to a branch office; fax it to (757) 499-5380, or email it to ACH Disputes at ACHDisputes@chartway.com. Only **Written Statements of Unauthorized Debit** should be sent to this email address.

Written Statement of Unauthorized Debit

I have examined the account statement or other notification indicating that an ACH debit entry posted to my account with the information below. The debit was unauthorized, revoked, improper, or incomplete.

MEMBER NAME (Please Print)

ACCOUNT NUMBER

PAYEE COMPANY NAME

POSTING DATE (MM/DD/YY)

DOLLAR AMOUNT

Please select only one appropriate reason for your request.

The ACH Debit was unauthorized.

An ACH debit can be considered unauthorized if: you never authorized the ACH debit entry from this account; you authorized an ACH debit from this account, but the debit amount is different than the amount authorized; or it was posted earlier than the date authorized.

The authorization for the ACH debit was revoked.

You authorized the ACH debit but revoked the authorization, in accordance with your agreement with the Payee Company named above, prior to the date the debit posted to your account.

Incomplete Transaction.

You authorized the ACH debit, but the payee did not receive the funds.

The check I wrote was improperly converted to an ACH debit.

The following are scenarios that could be considered as improper conversions of your check:

- Both your check and an ACH debit were presented for payment from your account.
- You did not receive a notice stating that your check may be converted or re-presented as an ACH debit.
- Your check that was converted to an ACH debit was altered, the signatures were not authentic or authorized, or the amount used was not the same as the written check amount.

I certify that by signing this Written Statement of Unauthorized Debit, that I am an authorized signer, or otherwise have the authority to act, on the account identified in this statement, that the debit transaction was not initiated with fraudulent intent by me or any person acting in concert with me, attest that the information provided on this statement is true and correct, and that the signature below is my proper signature.

Signature Required:

PRINTED NAME

SIGNATURE

DATE(MM/DD/YY)

NOTE: Please allow two business days for processing. Payments past 60 days may not be eligible for recovery.



This credit union is federally insured by the National Credit Union Administration.
Membership eligibility subject to verification.

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