



2805 Bowers Ave • Santa Clara CA, 95051
 Fax (408) 731-4068
 Attn: ACH Stop Payments

Account Number _____

Name _____

ACH STOP PAYMENT ORDER/CANCELLATION (of previous Stop Order)

You may complete this form online and print to sign and fax or mail as indicated above.

NEXT DATE OF ITEM	PREV. DATE OF ITEM	AMOUNT OF ITEM	ITEM ORIGINATOR (COMPANY SENDING THE TRANSACTION)

REASON _____ PROC. BY _____ BR.# _____ FEE \$ _____

At your request, we will

- stop only the next occurrence of this debit - anticipated debit date of: _____ (mm/dd/yy)
- stop the next _____ (number of debits/payments) _____ (frequency of debits/payments - i.e., weekly, monthly) received from this Originator
- stop all debits from this Originator (will stay in place until revoked in writing by member)
- cancel previously-placed ACH stop payment order

for the ACH transaction described on this form above. This order is effective if received at least three banking days before the scheduled date of the transfer, and unless the item in question has already been posted to your account. You must inform us immediately if you want to cancel this order. If you close the account on which the item(s) is/are drawn, the order will cancel automatically, and we will return the item coded "account closed" if it is presented.

Given reasonable time to act, KeyPoint Credit Union will make every effort to stop the ACH transaction described above, but cannot be held liable if the item is posted in spite of these efforts. The Credit Union's liability shall not, in any event, exceed the amount of the ACH item. By signing below or by placing this order by phone, you agree to reimburse the Credit Union for any loss it sustains in honoring your request.

Please note: *We cannot place an ACH stop payment unless you have previously received an item from this Originator.* You may notify us of any changes in this order by calling (888)255-3637.

Date of request

Time

AM PM

Member's Signature Required