

**Statement of
Unauthorized
ACH Debit**

[ALVA STATE BANK & TRUST COMPANY]



Written Statement of Unauthorized Debit (ACH)

1. Account Transaction Information

Name _____ Account Number _____

Amount of Debit: _____ Date of Debit _____

Party Debiting the Account: _____

2. Statement

I (the undersigned) hereby attest the (i) I have reviewed the circumstances of the above electronic (ACH) debit to my account, (ii) the debit was not authorized, and (iii) the following, to the best of my ability to identify, is the reason for that conclusion:

(Please select the option that best fits your reason for dispute)

_____ I did not authorize the party listed above to debit my account.
(R10; R05 if CCD/CTX to consumer account)

_____ I revoked the authorization I had given to the party to debit my account before the debit was initiated.
(R07 if PPD, TEL or WEB entry only)

_____ My account was debited before the date I authorized.
(R10)

_____ My account was debited for an amount different than I authorized.
(R10)

_____ My account was debited, but the corresponding payment was not credited to my account with the party listed above.
(R10)

_____ I did authorize the party listed above to debit my account, but they have exceeded the permissible attempts to collect.
(R10)

_____ My check was improperly processed electronically. If yes, please explain

3. Signature

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.

Any intentional attempt to obtain money from a financial institution by misrepresenting whether a transaction was authorized may result in the imposition of fines up to \$1,000,000, or imprisonment up to 30 years, or both under the provisions of Federal law (18 U.S.C. §1344).

I have read this statement in its entirety and attest that the information provided on this statement is true and correct.

Signature: _____ **Date** _____

For Financial Institution Use Only

Accepted by _____ Date _____ Date Entry(ies) Returned _____ Completed by _____