

ACH STOP PAYMENT FORM

**BCBST EMPLOYEE CREDIT UNION
801 PINE STREET
CHATTANOOGA, TN. 37402**

TRANSACTION TYPE

- ACH**
- ELECTRONIC CHECK (CHECK THAT IS TRUNCATED AT THE POINT OF SALE OR AT MERCHANT SITE)**

REQUEST RECEIVED

REQUEST ACCEPTED

- | | |
|------------------------------------|------------|
| <input type="checkbox"/> IN PERSON | DATE _____ |
| <input type="checkbox"/> BY PHONE | TIME _____ |
| <input type="checkbox"/> _____ | BY _____ |

ACCOUNT NUMBER _____

ACCOUNT NAME _____

PAYABLE TO _____

CHECK NUMBER _____

REASON FOR STOP PAYMENT _____

EXACT AMOUNT OF STOP PAYMENT _____

IMPORTANT!! BECAUSE OF THE LARGE VOLUME OF ITEMS WE PROCESS, WE DO NOT VISUALLY INSPECT EACH ITEM. WE USE A COMPUTER SYSTEM. THEREFORE, EVERY ONE OF THE ITEM DESCRIPTIONS INDICATED BY AN X MUST BE EXACT OR OUR COMPUTER SYSTEM WILL NOT BE ABLE TO IDENTIFY THE ITEM, MAKING THIS STOP PAYMENT ORDER INEFFECTIVE.

ACCOUNT NAME: _____

YOU AND WE WILL ABIDE BY THE RULES AND REGULATIONS (AS ESTABLISHED BY THE UNIFORM COMMERCIAL CODE OR OTHER LAW) GOVERNING STOP PAYMENT ORDERS. TO BE EFFECTIVE, WE MUST RECEIVE THE STOP PAYMENT ORDER IN TIME TO GIVE US A REASONABLE OPPORTUNITY TO ACT ON IT, AND BEFORE OUR STOP PAYMENT CUTOFF TIME. IF ANY, ORAL STOP PAYMENT ORDERS (INCLUDING BY PHONE) ARE BINDING FOR A 14 DAY PERIOD. PROPERLY SIGNED STOP PAYMENT ORDERS ARE EFFECTIVE FOR 6 MONTHS AFTER THE DATE ACCEPTED AND WILL AUTOMATICALLY EXPIRE AFTER THAT PERIOD UNLESS RENEWED IN WRITING.

AUTHORIZED SIGNATURE: _____