



Written Statement of Unauthorized Debit

Please complete one form for each disputed item.
To expedite your request, please return the completed form to one of our branches or email it to ACHDisputes@chartway.com.

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

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)

Member Number

Posting Date (MM/DD/YY)

Payee Company Name

Dollar Amount

Please select the most appropriate reason for your request (select only one).

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The Authorization for the ACH Debit was Revoked.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. This debit transaction was not initiated with fraudulent intent by me or any person acting on my behalf. That the information provided on this statement is true and correct, and that the signature below is my proper signature.

Member Name (Print) _____

Member Signature _____ **Date** _____

Thank you for choosing Chartway! We appreciate the opportunity to serve you, and we're grateful that you've chosen to make us your financial home.

Please allow 10 days for processing. Transactions past 60 calendar days are not eligible for dispute. Please submit one (1) form per disputed item. Incomplete forms / errors will delay the credit.

INTERNAL USE ONLY: Written Statement of Unauthorized Debit should be completed and submitted to Image Retrieval for ACH Processing.

This credit union is federally insured by the National Credit Union Administration.