

JULY SKIP – A – PAYMENT REQUEST FORM

One form for each loan

MEMBER NAME: _____ PHONE# _____

MEMBER ACCT# _____ LOAN# _____

DATE OF REQUEST _____

SKIP JULY - *Interest still accrues and balance may increase due to credit insurance premiums. VISA, FYR-QUICK AND HOME EQUITY LOANS EXCLUDED.

I hereby request that the credit union authorize me to skip my loan payment. I understand that interest will continue to accrue on all new and existing balances during the skip payment period pursuant to my agreements with the credit union; and that all terms and conditions will apply after the skip payment period. I understand that the interest continues to accrue and is charged to the loan over the extended period in which the payment has not been made. I will not be notified by the credit union unless this request is denied.

By signing below, you agree to amend the terms of your original loan agreement **BS** _____

And to repay the entire balance of \$ _____ plus interest at **COLL VALUE** _____
_____ % by paying \$ _____ every _____

beginning _____ / _____ / _____ **D/R** _____

Original Loan Date _____ *# of Skips* _____

ACH _____ *Payroll Deduction* _____ *Transfer* _____ *Cash* _____

\$10.00 FEE TO BE WITHDRAWN FROM SAVINGS CHECKING IF APPROVED (CIRCLE ONE).

BORROWER SIGNATURES:

Borrower **Date**

Borrower **Date**

Loan Officer **Date**

File Maintenance **Date**