

DISPUTE OF UNAUTHORIZED ACH DEBIT

Amount of Debit \$		Number
	Date of Debit	
Name of Unauthorized Compan	ny	
electronic (ACH) debit to my a	, hereby attest that I have review account. I declare that the debit was wing, to the best of my ability to id	not authorized or the authorization
Please check the box next to the	e statement that best describes the	reason for your dispute.
I did not authorize the debit t	to my account.	
	ot authorize the party listed above to	o debit my account.
	k that was processed electronically	
terms of my authorization. ☐ My account was debite ☐ My account was debite ☐ My account was debite instructed. ☐ My check was imprope ☐ A debit to my account of I authorized the party listed ☐ I revoked the authorization initiated. ☐ Other (must specify)	erly processed electronically. that was previously returned was re above to debit my account, but: ation I had given to the party to deb or have the authority to act on the	thorized. they failed to make my payment(s) einitiated. it my account before the debit was
concert with me.	, u	with the committee of the control of
	Sign and Return via Fax or Mai	l to:
	Piedmont Advantage Credit Union Attn: E-Commerce Department 3530 Advantage Way	n
	Winston Salem, NC 27103 Fax: 336-744-8894	