Account Number

Member Number

Member Name



P.O. BOX 6048 DEARBORN, MICHIGAN 48121 PH 888.336.2700 dfcufinancial.com

Written Statement of Credit Refused by Receiver (ACH)

Account/Transaction Information:			
Name(s) on Account		Account Number	
Credit Refused by Rece	iver Information:		
Party Crediting the Account	Amount of Credit	Date of Credit	

Statement:

I, (the undersigned), hereby attest that (1) I have reviewed the circumstances of the above electronic

(ACH) credit to my account, (2) the credit is being rejected, and (3) the following, to the best of my ability to identify, is/are the reason(s) for that conclusion:

Exact amount required has not been remitted.

- Account is subject to litigation, and I will not accept a transaction.
- Acceptance of this transaction(s) results in overpayment.
- Originator is not known by me.
- I have not authorized the credit entry.
- Other (Please describe your reason in detail)

Signature(s):

I am an authorized signer, or otherwise have authority to act, on the account identified in this statement. I attest that the credit transaction above was not originated with fraudulent intent by me or any person acting in concert with me.

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

Member Signature

Printed Name

Date