



Written Statement of Unauthorized/Improper ACH Debit

Fill out the form as completely and accurately as possible. A complete form will improve our ability to investigate your claim. Automated Clearing House (ACH) rules require a Written Statement of Unauthorized Debit before an unauthorized debit may be returned.

To expedite your request, please return this completed form to a branch, send it as an attachment in an email to us at service@docfcu.org, or fax it to us at 202-482-4317. If you are unable to return the form to a branch, you may mail your signed, completed form to Department of Commerce Federal Credit Union at the following address: **Department of Commerce Federal Credit Union, ATTN: E-Services, P.O. Box 14720, Washington DC 20044.**

Written Statement of Unauthorized Debit

I have examined the account statement or other notification sent by Department of Commerce Federal Credit Union indicating that an ACH debit entry posted to my account with the information below. The debit was unauthorized, incorrect, revoked, improper, incomplete, or was improperly converted.

Member Information		
Member Name(s):		
Account Number:	Posting Date (MM/DD/YY):	Dollar Amount:
Payee Company Name:		

Only one payee/company may be listed on the form. Additional payees/companies each require their own form.

Please return this ACH debit for the reason below, place a checkmark where applicable. To avoid delays, choose only one reason from the selection below. ACH entries from the above company may be returned indefinitely.

ACH DEBIT WAS DEDUCTED FROM:

Checking Suffix #: _____ Savings Suffix #: _____

Please select only one reason for your request.

- I did not authorize the known above-named company to debit my account for the above listed entry or entries.
- I did not authorize the unknown above-named company to debit my account for the above listed entry or entries.
- I revoked the authorization I had given to the party to debit my account before the debit was initiated.
- The ACH debit was incorrect. An ACH debit can be considered incorrect if you authorized an ACH debit from this account, but the debit amount is different than the amount authorized; it was posted earlier than the date authorized; the third party failed to make your payment as instructed; or a debit that was previously returned was improperly reinitiated.
- The transaction was incomplete. You authorized the ACH debit and the funds were taken from your account, 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.
 - The dollar amount is different than what was written on the check.

I am an authorized signer on the above-referenced account or otherwise have authority to act on the account identified above. I attest that the listed debit(s) was (were) 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.

If you need assistance completing this form, you may contact Department of Commerce Federal Credit Union toll-free in the U.S. at 202-808-3600, visit docfcu.org for toll-free numbers when overseas.

Signature is Required:

Full Name: _____

Signature: _____ Date: _____

Note: Your claim will be resolved within 10 business days of receipt or a provisional credit will be applied to your account. Payments past 60 days may not be able to be recovered but will still be investigated.

Internal Use:

Completed By	
Date:	Teller #:
Employee Name:	