

SKIP-A-PAYMENT



Members in good standing can skip their December loan payments

In order to participate in this special program, this form must be completed and returned to your local Alabama Teachers office no later than November 15, 2014.

A \$10 fee will be assessed per loan if the Skip-a-Payment form is received after November 15th.

NO FORMS WILL BE ACCEPTED AFTER DECEMBER 15, 2014.

Completed forms may be returned to your nearest office or mailed to:

- PO Box 1400 ↻ Gadsden, Alabama 35902
- PO Box 1486 ↻ Albertville, Alabama 35950
- PO Box 4477 ↻ Anniston, Alabama 36204
- PO Box 186 ↻ Centre, Alabama 35960
- PO Box 681108 ↻ Fort Payne, Alabama 35968
- PO Box 3568 ↻ Oxford, Alabama 36203

*By signing, you and any cosigners authorize Alabama Teachers Credit Union to advance the due date on the loan(s) specified by one month. Interest will continue to accrue on the balance of the loan from the last payment date. Loans must be current to qualify. All other terms and conditions of the loan(s) will remain. Loans excluded from this offer are Visa® Credit Cards, real estate loans, single pay loans, workout loans, business loans, or lines of credit. GAP insurance may not apply to the extended loan term. If paying a \$10 fee through a transfer from an ATCU share or share draft account, funds must be available over any minimum balance requirement to cover the fee at the time this form is processed. The primary and all joint/cosigning members/owners must sign the request form to skip the loan(s). Subject to credit union terms and conditions, may be changed without prior notification.



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

Complete the form below and return to the nearest office.

Alabama Teachers Credit Union Skip-A-Payment Coupon*

If applicable, I will pay the \$10 processing fee for each loan by:

Share # _____
 Share Draft # _____
 Cash/Check

Member Signature: _____ Date _____
 Joint Owner Signature: _____ Date _____

Joint Owner Signature: _____ Date _____
 Joint Owner Signature: _____ Date _____

Loan(s) to be skipped: Loan # _____ Loan # _____

Loan # _____ Loan # _____

For payments on automatic deduction, please list the account from which the payments are withdrawn. Acct # _____

Payroll	Payroll #	Start Date	Skip Box	Notes	For Internal Use Only
<input type="checkbox"/>	_____	_____	<input type="checkbox"/>		
<input type="checkbox"/>	_____	_____	<input type="checkbox"/>		
<input type="checkbox"/>	_____	_____	<input type="checkbox"/>		
<input type="checkbox"/>	_____	_____	<input type="checkbox"/>		

Received by Teller # _____ Name _____ Date _____ Employee Keyed # _____ Name _____ Date _____