

CANCELLATION OF AUTOMATIC WITHDRAWALS (ACH DEBITS)

From Other Financial Institutions to FedStar Credit Union

I,, hereby	revoke and cancel the author	rization of FedStar Credit Union to initiate
automatic withdrawals (ACH debits) from	m:	
Financial Institution:		
Date(s) Draft Occurred:		
Account Number:		
Type of Account: Savings		
Automatic Withdrawal Amount:	:\$	<u> </u>
Effective Date of Cancellation:		<u> </u>
FedStar Credit Union account or loan, lis	sted below.	
FedStar Credit Union Loan Num	ıber:	
Print Name	_	
Signature	-	
Date	_	

Notice

This cancellation form is required to cancel any automated draft initiated by the member. This written notification of the termination of any ACH Debit must be submitted in order to cancel an ACH Debit from another financial institution to Fedstar Credit Union. Please allow at least 7 days processing time.