

# Affidavit of Unauthorized ACH Debit

\_\_\_\_\_  
Name

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Evening Phone

**I declare that the ACH charged to my account and appearing on my account statement is UNAUTHORIZED OR IMPROPER.**

\_\_\_\_\_  
Payee

\_\_\_\_\_  
Date of ACH

I state that: (complete one)

- A. \_\_\_\_\_ I did not sign a written authorization with the payee.
- B. \_\_\_\_\_ I revoked the authorization with the payee in the manner specified in the original authorization.
- C. \_\_\_\_\_ The debit was for more than the amount I authorized.
- D. \_\_\_\_\_ The debit was debited to my account earlier than I authorized.

**I further declare that the ACH transaction was not initiated and was not originated with fraudulent intent by me or any person acting in concert with me.**

**I certify under penalty of perjury that the foregoing is true and correct.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

OCU Use Only:

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date