Written Statement of Unauthorized ACH Debit

Accor	unt/Debit Information				
	Name				
	Account Number				
	Payee				
	Transaction Da	nte	Transaction Amount		
	(Please attached if needed)				
State	ment				
	I (the undersigned) hereby attest that (i) I have examined the above electronic (Ach) debit to my account, (ii) the above debit was an unauthorized or improper debit, and (iii) I further state, to the best of my ability, is the reason why:				
	I did not authorize the above p	t authorize the above payee to debit my account			
	I revoked the authorization given to the payee before the debit was indicated My account was debited prior to the date that I authorized				
	My account was debited for an	ount was debited for an amount different than I authorized			
	Both source document and con	rrespond	ding ach item have been presented for payment		
	Other (please specify)				
Signa	ture				
		urther st	riginated with fraudulent intent by me or any person atte that I am an authorized signer, or otherwise		
	I attest that the statements above are true and correct.				
Date		Signati	ure		