



New Cumberland Federal Credit Union  
ACH Debit Activity Stop  
Payment Form

(to be used to stop a transaction before the ACH transaction posts to the account)

**FORM MUST BE COMPLETED PROPERLY BY THE MEMBER AND SIGNED  
BEFORE THE RETURN CAN BE PROCESSED**

Date of Request \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Account Number \_\_\_\_\_ Members Name \_\_\_\_\_

Exact Amount of Transaction to stop \$ \_\_\_\_\_ or \_\_\_\_\_ Stop **ALL** transactions

This form acknowledges members' request to stop payment on the preauthorized electronic funds transfer shown below. **If an item is presented and does not exactly match the information you provide on this form or it's presented in a different method than ACH debit it may be paid or returned according to NCFCU policies and procedures.** The Credit Union will not be held liability for costs and expenses arising from the refusal to pay an item as to which the member has given a stop payment order.

**A stop payment order will remain in effect until the member withdraws the stop payment order in writing or by checking the option below.**

Originating Company Name \_\_\_\_\_

Date of Next Scheduled Payment \_\_\_\_\_

**I am requesting to stop this debit for one-time only**     **Yes**     **No**

I understand there is a \$15.00 fee for each ACH stop payment and my account will be debited accordingly.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return Code-R08 Stop Payment on Specific Debit Only

COMPANY/FORMS/TELLER FORMS/ACH DEBIT STOP PAYMENT

EFFECTIVE 8/2022

Teller # \_\_\_\_\_ Date Teller Received: \_\_\_\_\_ Processed by: \_\_\_\_\_ Date Processed: \_\_\_\_\_

Time Received: \_\_\_\_\_ Item Returned Date: \_\_\_\_\_

(remove stop payment from the system after item has been returned if the option box is checked)