

STOP PAYMENT ORDER

Florida A&M University Federal Credit Union

1610 South Monroe Street, Tallahassee, FL 32301

Phone 850-222-4541 ■ Fax 850-222-5401

Please refer to applicable fee schedule

Draft Account Number	Member's Name
Member's Address (including City, State and Zip)	

SINGLE DRAFT STOP PAYMENT ORDER

Date of Draft	Draft Number	Amount of Draft	Payable To
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SERIES OF DRAFTS STOP PAYMENT ORDER

<u>FROM</u> Draft Number	<u>TO</u> Draft Number
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Please stop payment on the draft(s) described above, unless you have already paid, certified or accepted it (them). I understand that this written request will cease to be effective six months from the date shown below and, an oral request will cease to be effective fourteen days from the date shown below unless it is previously cancelled or renewed in writing by me. The Florida A&M University Federal Credit Union ("the Credit Union") will not be liable for payment of the draft(s) contrary to this request unless payment is caused by the Credit Union's negligence and causes actual loss to me. The Credit Union's liability shall not, in any event, exceed the amount of the draft(s). I agree to reimburse the Credit Union for any loss it sustains in honoring this request.

Member Signature

Date & Time

Keep a copy for your records

Internal Use only	Sent/Requested via:	<input type="checkbox"/> Mail	<input type="checkbox"/> Facsimile	<input type="checkbox"/> In Person
_____ C.U. Employee Signature				_____ Date & Time