

SKIP LOAN PAYMENTS

Complete this form, and bring it to any Columbia branch or mail to:

Columbia Credit Union, attention loan operations, P.O. Box 324, Vancouver, WA 98666 prior to November 30, 2010.

I authorize Columbia Credit Union to extend my loan payment(s) as requested. I understand this adjustment does not affect the other items in my indebtedness and the finance charge will continue to accrue on the unpaid balance(s). I understand a \$25 fee will be charged for each loan I am requesting to skip a payment on and that the fee is due and payable at the time of the request. When I make my next payment(s), I may not see any principal reduction on the loan(s). Regular monthly payment is required on loans excluded from this offer. **Loans not eligible for skip-pay: Loans with a balance greater than \$35,000; first or second mortgages; interest only Home Equity Lines of Credit; business loans, credit cards; loans included in bankruptcy; debt restructure plans; with delinquency history; or in default of any loan agreement. Request must be received at least two weeks prior to loan due date.**

1 Account# _____ Loan# _____ Payment _____ Nov. or Dec.

2 Account# _____ Loan# _____ Payment _____ Nov. or Dec.

3 Account# _____ Loan# _____ Payment _____ Nov. or Dec.

A \$25 fee per loan payment skipped is required and may be paid by check or deducted from your Columbia savings or checking account.

Please check one: Check enclosed Deduct from savings Deduct from checking
Account# _____ Account# _____

IMPORTANT – Please check the box if you make your payments by:

Debit authorization from another financial institution

This skip-pay request may not stop your loan payments coming from another financial institution. You must contact Columbia a minimum of 5 (five) business days in advance of your payment. If you do not, the funds normally applied to your loan will be deposited into your Columbia savings.

Recurring CCU online banking auto-pay

If you use Columbia's online banking to make recurring loan payments, you must log into your account and stop the recurring payment for December. Remember to set it up again in January.

CCU auto-pay

Name _____ Daytime phone _____

Address _____

City _____ State _____ ZIP _____

Signature X _____

(signing above authorizes skip-pay and withdrawal of fee)



360.891.4000
www.columbiacu.org

Federally insured by NCUA.

