

# 2017 Holiday Skip-A-Payment

Member Name: \_\_\_\_\_ Member Number: \_\_\_\_\_

I would like to Skip the following month (choose only one):

\_\_\_\_ November \_\_\_\_ December \_\_\_\_ January

Payments made through your direct payroll deposit and payments made electronically from another financial institution will continue to be drawn and will be automatically deposited to your Share Savings account.

Please deduct the \$35 processing fee (per loan) from:

\_\_\_\_ Share Savings Account

\_\_\_\_ Checking Account

\_\_\_\_ I will pay by check (enclosed)

I would like Skip-A-Payment on the following loan(s):

<u>Loan #</u>	<u>Loan Type</u>
_____	_____
_____	_____
_____	_____

Borrower Signature: \_\_\_\_\_

Co-Borrower Signature: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

All applicants and co-applicants must sign this form. By signing this form, you agree to extend your final loan payment one month. Interest will continue to accumulate during the month you skip your payment(s). Loans must be current and have positive payment history of more than six months. Skip-A-Payment cannot be used on Home Equity Loans.

