It's Time to Set Payments Aside!

2024 HOLIDAY



| Member Name: | Member Number: |
|--|--|
| I would like to Skip the following month (CHOOSE ONL | Y ONE):NovemberDecemberJanuary |
| | ue to be drawn and will be automatically are Savings account here at the Credit Union |
| Please deduct the \$35 processing fee (PER LOAN) from: | . |
| Share Savings Account | FIRST PACE® CREDIT UNION Your first place for financial service. |
| Checking Account | TINGITACE |
| I will pay by check (enclosed) | CREDIT UNION |
| | Your first place for financial service. |
| I would like Skip-A-Payment on the following loan(s): | |
| <u>Loan #</u> <u>Loan Type</u> | QUESTIONS OR TO SUBMIT FORM: |
| | PHONE: (651) 451-8495 |
| | FAX: (651) 450-9978 |
| | EMAIL: Stephanie@firstpacecu.com |
| | s form, you agree to extend your final loan payment one month. Interest nt(s). Loans must be current and have positive payment history of more Loans. |
| Borrower Signature: | _ Co-Borrower Signature: |
| Borrower Daytime Phone: | Borrower Email: |