

HOLIDAY

SKIP-A-PAY

Please complete this form if you would like to skip a payment during the month of November. If you are on any form of automatic payment (such as payroll or ACH), this form must be turned in **TWO WEEKS** prior to November 1st, or we will not be able to process and you will not be eligible for Skip-A-Payment program. If you are cash-pay, you must have your request turned in **ONE WEEK** prior to the due date. No exceptions will be made.



OKLAHOMA FEDERAL
CREDIT UNION



517 NE 36th St | OKC, OK 73105 | Ph: 405.524.6467 | F: 405.524.1067 | www.okfcu.com

Federally insured by **NCUA**.

Member Name _____ Member Account Number _____

Address _____ Daytime Phone Number _____

Loan Number _____ Payment Amount \$ _____

Loan Number _____ Payment Amount \$ _____

Loan Number _____ Payment Amount \$ _____

Method of Payment (circle one) Check Enclosed Deduct from OKFCU Savings Deduct from OKFCU Checking

As an Oklahoma Federal Credit Union member in good standing, I am requesting to defer a payment on the qualifying consumer loan(s) I have listed above. This offer is good through November 30, 2018. All loans must be current to qualify for Skip-A-Payment. This offer does not apply to mortgage, HELOC, VISA, LOC, Home Equity Loans or on the first payment of any loan. Interest on your loan will continue to accrue during the month that the payment is skipped, and only one payment may be skipped per loan. I understand this action will extend the term of my loan(s) indicated above by one month. I understand that I will be contacted at the phone number listed above if my request cannot be approved. I also understand that I will pay a total processing fee of \$20 per loan. This form must be completed, signed by all parties of the loan and submitted at least two weeks before payment due date in order to process the application. Payment must be received in order to process application.

Member Signature _____ Date of Request _____

Member Signature _____ Date of Request _____

FOR CREDIT UNION USE ONLY: Transaction Date _____ Processed By _____ Approved By _____