



CHECK STOP PAYMENT FORM

The purpose of this form is to Stop Payment on a check that has not cleared your account. If the check was cashed or presented at a Shared Service Center you can not use this form. The Credit Union will confirm receipt and post the stop payment the same day if received by 4PM EST on a regular business day. If it is received after 4PM EST or on a weekend or holiday, then the request will be processed the next working day.

The Stop Payment is NOT guaranteed until 24 hours after processing. The Stop Payment is permanent unless removed by the member, in writing. In urgent cases, a Stop Payment may be placed by phone with one of our member service representatives, but it is not guaranteed until after receipt of this form.

MEMBER INFORMATION		
Member Name		CU Member Number
Daytime Phone	Cell Phone	Member Email Address
FINANCIAL INSTITUTION BEING DEBITED		
Checking Account Number		Check Number
Transaction Amount		Date Issued
Name of Payee		
Reason for Stop Payment		

See Rate and Fee Schedule for Stop Payment Fee amount. A FEE will be charged to your checking account for processing the Stop Payment request. The Stop Payment will not be processed if the FEE is not available in the account. The Stop Payment FEE is non-refundable.

NOTE: We will assume no liability if the member decides not to change his/her checking account number, after reporting a check lost or stolen.

Member Signature _____ Date _____

Fax this completed form to 404-598-2586, or scan & email to creditunion@coca-cola.com or deliver/mail to the Credit Union office at Coca-Cola Credit Union, PO Box 1734, Atlanta, GA 30301-1734.

FOR CREDIT UNION USE ONLY		
Date/Time Received	Stop Payment Date	Processors Initials