Federal Credit Union
Phone: 703.914.8700 / 540.986.0652
Fax: 703.245.0540
infirstfcu.org

ACH Stop Payment Form

Please complete the information below to ensure that the credit union will be able to stop payment on a pre-authorized electronic debit also known as an ACH (Automated Clearing House) transaction. The stop payment fee is $32.00 and will be debited from your account at the time that this request is processed. If you do not have sufficient funds available when we receive the form, we will be unable to process your ACH Stop Payment request. Please allow up to 24 hours, or one business day, for the credit union to process this request. Once this form has been completed, please fax the form to **703.245.0540.**

Date of Request: Member Name:

Account/Member #

Amount:

Return Reason:

One-time Stop Payment ☐ Reoccurring Stop Payment ☐

Merchant Name:

Company ID (10 digits):

Date of Last Payment:

Member Signature: _____Date:_____

Accounting Office Use Only:

Date Received: _____

Date Stop Payment Placed: _____

Initials: _____