



Holiday Skip-A-Pay Authorization Form

Please complete and return form to TruPartner Credit Union by:

- Mail: 1717 Western Ave., Cincinnati, OH 45214
- Drop off at any TruPartner office location
- Fax: 513.241.6093
- Through Online Banking at TruPartnerCU.org

Member Name: _____

Street Address: _____

City/State/Zip: _____

Daytime Phone #: _____

Account Number: _____ Social Security #: _____

Choose (circle) only one month

Loan Account #: _____	Monthly Payment: _____	Dec. 2021	Jan. 2022
Loan Account #: _____	Monthly Payment: _____	Dec. 2021	Jan. 2022
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By deferring the **December 2021** or **January 2022** payment, I/We understand interest will still accumulate on the outstanding balance, which will increase the total cost of borrowing. I/We will resume payments as scheduled following the month skipped as indicated above. I/We understand there is a \$25.00 processing fee for each loan payment skipped.

Delinquent loans and accounts not in good standing, student loans, loans made or refinanced after August 31, 2021, first mortgage loans, second mortgages and loans granted extension agreements in 2020 are ineligible for Skip-a-Pay. Only two payments can be skipped in a consecutive 12-month period per loan.

Please select a payment method for Holiday Skip-a-Pay fee:

- Payment enclosed Deduct from my savings account Deduct from my checking account

Signature: _____ Date: _____

Co-Signer/Joint Borrower Signature: _____ Date: _____

Co-Signer/Joint Borrower Signature: _____ Date: _____

YOUR SAVINGS INSURED TO \$250,000 PER ACCOUNT



This institution is not federally insured, and if the institution fails, the Federal Government does not guarantee that depositors will get back their money. MEMBERS' ACCOUNTS ARE NOT INSURED OR GUARANTEED BY ANY GOVERNMENT OR GOVERNMENT-SPONSORED AGENCY.



For Credit Union Use Only

CU Initials: _____

Completed Date: _____