

Written Statement of an Unauthorized Remotely Created Check

(Remotely Created Checks Only)

| Name: | | Wings ID: |
|---|-------------------------|--|
| Account #: | | Phone #: |
| Check #: | Date of Debit: | Amount of Check: |
| Check #: | Date of Debit: | Amount of Check: |
| Check #: | Date of Debit: | Amount of Check: |
| Payee (one per form): | | |
| issuance of the check(| s) in the amount or to | the Remotely Created Check(s) is drawn, I did not authorize the the payee stated on the check(s). Date: |
| Signature Notarization: Subscribed and sworn be | | |
| thisday of | , 20_ | |
| by | | Notary Public |
| State of | | _ |
| County of | | _ |
| My Commission Expires | | Notary Stamp |
| Return to Wings Financ | cial Credit Union, Elec | ctronic Payments, 14985 Glazier Ave Apple Valley, MN 55124 |
| Credit Union Use: | | |
| Account Credited by: | Date: | ■ Send to Electronic Payments for processing |
| Electronic Payments: Pro | ocessed by: | Date: |