

# Checking Account Stop Payment Form

Midwest Coalition of Labor



Credit Union

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

**Single Check** - \$25 Charge

Check Number: \_\_\_\_\_ Check Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Payable To: \_\_\_\_\_

Reason For Stop: \_\_\_\_\_

\_\_\_\_\_

**Series of Checks** - \$50 Charge

Check Numbers \_\_\_\_\_

Reason For Stop: \_\_\_\_\_

\_\_\_\_\_

You agree to hold harmless the Midwest Coalition of Labor Credit Union (MCLCU) for the amount, expenses, and costs incurred by refusing payment of above check(s). You also agree not to hold MCLCU liable if above check(s) is (are) paid in error. Please verify above information and notify MCLCU if incorrect. A stop payment will **ONLY** be placed once a **SIGNED COPY** of this form is received. Please fax or mail the completed form back to the credit union. A written stop payment is permanent. Stop payment fee is non-refundable.

Signature \_\_\_\_\_

Please return to: Midwest Coalition of Labor Credit Union  
6240 Joliet Rd  
Countryside, Illinois 60525  
Fax: (708) 482-9622

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For Credit Union Use Only

Verify DX    Sent Form    Verify DX    Stop M421-permanent    Fee Applied

Employee \_\_\_\_\_