

**SKIP-A-PAYMENT
GIVE BACK FOR THE HOLIDAYS**

Thank you for using Central Communications Credit Union for your borrowing needs, we invite you to skip a loan payment in November, December or January. This wonderful opportunity gives you that little extra cash for the **Holidays**, and helps a worthy cause at the same time. A portion of the fee will be donated to **Children's Miracle Network Hospitals**. The fee is based on your monthly loan payment.



<u>Monthly Loan Payment</u>	<u>Skip-A- Payment Fee</u>
To \$100.00	\$15
\$100.01- \$200.00	\$20
\$200.01- \$300.00	\$30
\$300.01- \$400.00	\$40
\$400.01 +	\$50



Member Name:		Account Number:	
Daytime Phone:		Loan Type/Suffix:	
Month to Skip:	November 2023 <input type="checkbox"/>	December 2023 <input type="checkbox"/>	January 2024 <input type="checkbox"/>
Please deduct service fee from:	Savings <input type="checkbox"/>	Checking <input type="checkbox"/>	

TERMS AND CONDITIONS:

You may skip one monthly payment per loan per 12 mo. Depending on term you may be eligible for a total of up to 3 skips. Three consecutive monthly payments must be made to qualify. Accounts must be in good standing. Excludes home equity, first mortgage and credit card payments. If the loan payment is made by ACH origination from another institution and the Skip-A-Pay request is not approved in sufficient time before the scheduled payment date, the requested skipped payment may be delayed and processed the following month. If GAP was elected, the coverage will not be extended beyond the original maturity date. Finance charges will continue to accrue. Skipped payments will be added to the end of the loan balance. All requests are subject to review.

By signing below you hereby agree to the Terms and Conditions of the Skip--A-Pay program and request that Central Communications Credit Union allow you to skip one loan payment on the loan identified above. You authorize the service fee to be deducted from your account specified above if this form of payment was selected.

All signers on the original loan note acknowledge and authorize, upon approval by the Credit Union, the loan payment to be skipped as requested.

Borrower Signature _____

Date _____

Borrower Signature _____

Date _____

For Office Use Only

Employee Submitted:

Date:

Skip-A-Pay Plus One:

Return signed/completed form to a CCCU branch or email to rrhodes@centralccu.com