



STOP PAYMENT REQUEST

This form is to stop payment on checks only. Call 713.627.4000 or 800.877.8828 to stop an automatic debit.

Mail or Fax to:
MemberSource Credit Union
Attn: Member Service Center
10100 Richmond Ave
Houston, TX 77042
Fax: 713.244.3300

Member Number _____

Member Name (First, MI, Last) _____

Street Address _____

City, ST, Zip _____

Check Information:

Date	Check Number	Amount	Payable to
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

We will process your request to stop payment on the check(s) described above, unless we have already paid, certified or accepted it. The stop payment will not be effective until 24 hours after this request has been submitted. Your request will cease to be effective six months from the date shown above. MemberSource Credit Union will not be liable for payment of the check contrary to this request unless payment is caused by MemberSource Credit Union's negligence and causes actual loss to you. MemberSource Credit Union's liability shall not, in any event, exceed the amount of the check. You must reimburse MemberSource Credit Union for any loss it sustains in honoring this request.

MemberSource Credit Union will charge a stop payment fee based on the current Fee Schedule. Visit our website at www.membersourcecu.org for current fees or call 713.627.4000 or 800.877.8828.

Member Signature _____ Date _____

FOR CU USE ONLY

CU Representative _____ Department/Branch _____

Date Processed _____ Stop in XP2 complete