## SKIP-A-PAYMENT APPLICATION & DISCLOSURE

NAME:		
MEMBER NUMBER:		
LOAN TYPE:		
MONTH TO SKIP:		
HOW DO YOU MAKE YOUR PAYMENT?		
If you make your loan payment by Payroll Deduct Share Savings Account.	tion or Direct Deposit, your payment will be deposited	into your
There is a one-time \$25 processing fee per loan.		
I enclosed a check for \$25 per loan		
Debit my Checking Account for \$25 per loa Debit my Share Account for \$25 per loan	an	
Desit my share Account for \$25 per loan		
payment history and no collection action pending	nust be current and in good standing, must have three in g. Your account must not be overdrawn and you must ication fee, if you have selected a debit from your acco	have
This request must be received no less than 10 bu form must be completed for each loan.	usiness days prior to the payment you want to skip. A s	separate
BORROWER SIGNATURE:	DATE:	
CO-BORROWER SIGNATURE:	DATE:	

By signing above, I authorize Affinity Credit Union to amend the terms of the original agreement and extend the final loan payment beyond its original maturity for each month I skip. I understand I will be required to make the payment(s) skipped prior to my final loan payoff and the interest will continue to accrue at the contract rate including the month I have chosen to skip. This payment deferral will result in an extension of the maturity date and may increase the APR and Finance Charges disclosed on the original promissory note. This modification will affect Credit Life, Credit Disability, Debt Protection and GAP insurance. First Mortgages, Home Equity and credit cards are NOT eligible for this service.

I agree I will resume making scheduled payments beginning with the payment due during the month following the deferral and will make all scheduled payments due thereafter. I understand all these payments will be applied first to any applicable unpaid late fees and charges, then to the accrued interest due on the loan and the remaining amount is applied to the principal balance.

Complete and return to an Affinity location, by fax: (515) 288-1806, email: <a href="mailto:info@affinitycuia.org">info@affinitycuia.org</a> or mail: Affinity Credit Union, 475 NW Hoffman Lane, Des Moines, IA 50313.

