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Member Name

## Anticipated ACH Electronic Payments or Checks Form

This form is used to list any ACH electronic payments or checks you believe may post to your account in the next 10 days. It is your responsibility to contact the payees and inform them of your new account number. The credit union is providing this service as a courtesy and is not responsible for any unpaid item(s) on the account listed below.

Member A	Account Number		<del>-</del>
Closed A	.ccount Number and Share ID		
New Acc	ount Number and Share ID		<del></del>
Expecte	d ACH Payments		
	Payee	Amount	Expected Post Date
Expecte	d Uncleared Checks		
	Payee	Check #	Amount
Member's	s Signature		
Data			
Date			
For Cred Received	it Union Use Only I by Employee Name		