



4801 Kennedy Avenue
Cincinnati, OH 45209
(513) 333-3800

VOLUNTARY SKIP PAYMENT REQUEST AND AUTHORIZATION

In this Request and Authorization, the reference to "Us," means the Lender. The words "You" or "Your" mean each person accepting this Agreement. If this is a joint account, read singular pronouns in the plural.

Borrower(s) Name and Address: _____	Date Requested: _____
	Member Number: _____
	Loan Number: _____

Instructions: Except for mortgage, home equity and credit card accounts, You may elect to skip a month's payment for a fee of \$40.00 per loan during the calendar year (Skip Payments will not be authorized within the first 6 months of Your loan). Those members with qualifying loans that are payable on a bi-weekly basis may skip two consecutive payments. In order to request a skip payment, You must complete the Voluntary Skip Payment Request And Authorization form below in its entirety, and return it to Cinfed Credit Union signed by any Borrower listed on the loan. The request must be mailed to Cinfed Credit Union, 4801 Kennedy Avenue, Cincinnati, OH 45209.

You understand that Interest will continue accruing on the unpaid balance of Your loan at the Simple Interest Rate designated in Your Agreement until Your balance is paid in full, and that skipping a payment will have the result of increasing the total amount of interest paid, in which case You may be required to make additional payments after Your scheduled maturity date. You further understand that if credit insurance and /or GAP coverage is applicable to a loan in which You have requested to skip payment then the term of such insurance will not be extended and will instead terminate on the original maturity date.

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If You would like to skip a payment, please complete this authorization by indicating which account(s) that You would like to skip payment, the month You would like to skip and the manner in which You would like to pay the skip payment fee. Then sign the authorization and return it to Cinfed Credit Union, 4801 Kennedy Avenue, Cincinnati, OH 45209.

Skip Payment Fee: \$40.00 **FINANCE CHARGE**

Method of Payment:

transfer from account # _____ payment enclosed (please make check payable to Credit Union) **DO NOT SEND CASH**

ACCOUNT NUMBER / LOAN NUMBER	LOAN DESC / MONTH TO SKIP
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BORROWER SIGNATURE	DATE
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BORROWER SIGNATURE	DATE
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BORROWER SIGNATURE	DATE
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BORROWER SIGNATURE	DATE
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CREDIT UNION USE ONLY

APPROVED Authorized Signature: _____ Date: _____

REJECTED Comments: _____

Close- End: \$_____ fee debited from: Checking; Savings; or Paid By Check.

Open- End: \$_____ fee debited from: Checking; Savings; or Paid By Check.