Skip-a-Payment Form

Received by

Date

Evansville Teachers Federal Credit Union (ETFCU) / Liberty Financial, a division of ETFCU (LF)

Name	Member #		Phone #
Please defer my payment(s) for month of		the loan(s) listed:	
	(Month / Year)		
Loan Account #	Loan Account #		Loan Account #
payment(s) being skipped. ETFCU does not	have access to make any changast a 5 business day notification or	ges to transactions set up w n to stop any automatic pay	ther financial institution must be canceled by the member for the vithin online banking or through other financial institutions. ments that are originated by ETFCU.
□ # Transfer the funds from Financial Inst. Name:		Account #:	Routing #:
will be charged for each payment deferred with no more that payment deferment in the second half-year. Payments may l	n two payments per loan being def be deferred on multiple loans. If I p	erred per calendar year, subje urchased GAP insurance for r	pt there will be no payment due for the month listed above. I understand to loan, and my loan repayment term will be extended. A \$35 processing feact to the limitation of one payment deferment in the first half-year and one my auto loan, my contract will determine if my policy will cover any skippen nust be current to qualify for this offer and the loan open for a minimum of
Signature of Borrower			Date
Signature of Co-Borrower/Co-Signer			Date

All applicable co-borrowers/co-signers must also sign this form.

Please present this coupon at any branch, or mail it to Loan Servicing, Evansville Teachers FCU, P.O. Box 5129, Evansville, IN 47716-5129