



Skip-A-Pay Form

Name: _____ Email Address: _____

Phone Number: _____ Member Number: _____

Which month would you like to skip? (You may only skip one month)

___ November ___ December ___ January

Please choose loan payment(s) to skip:

Loan Description: _____ Loan Number: _____

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From which account should the \$30 processing fee be deducted?

___ Checking ___ Prime Share ___ Check Enclosed

How is the loan payment made?

___ Auto Pay from Star Choice Account

___ Auto Pay from another institution

___ Cash or Check

If you have questions about this form, please contact Star Choice Credit Union.

Signature: _____

Co-Applicant Signature: _____

By signing above, you authorize Star Choice Credit Union to extend your final loan payment by one month. A \$30 processing fee per loan will be automatically deducted from an account with available funds unless otherwise specified above. Interest will continue to accrue on your loan(s) during the month you skip your payment(s). Loans must be current, and all co-applicants must also sign this form. Fixed rate mortgages including express mortgages, student loans, business loans, lines of credit and MasterCard® credit card payment are not eligible. Request must be received 10 days prior to loan payment due date. Offer expires January 31, 2021.