



CREDIT UNION OF GEORGIA

P.O. Box 788, Acworth, GA 30101 | 678-486-1111 | www.CUofGA.org

Skip-A-Pay Request Form

Submit your Skip-A-Pay Request Form via one of the following methods:

- Deliver To Any Branch Location
- Mail: PO Box 788, Acworth, GA 30101
- Email: ContactUs@CUofGA.org
- Fax: 678-486-1191

Please indicate the month you would like to skip (please select only one box):

- | | | |
|----------------------------------|-----------------------------------|------------------------------------|
| <input type="checkbox"/> January | <input type="checkbox"/> February | <input type="checkbox"/> March |
| <input type="checkbox"/> April | <input type="checkbox"/> May | <input type="checkbox"/> June |
| <input type="checkbox"/> July | <input type="checkbox"/> August | <input type="checkbox"/> September |
| <input type="checkbox"/> October | <input type="checkbox"/> November | <input type="checkbox"/> December |

Complete the information below for each loan payment you wish to skip:

Loan Number _____ Payment \$ _____ Due Date _____

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Loan Number _____ Payment \$ _____ Due Date _____

Member Name _____

Address _____

City, State, Zip _____

Email Address _____

Daytime Contact Number _____

I authorize Credit Union of Georgia to skip my payment on the loan(s) listed above. I understand taking advantage of this option extends the current balance of the affected loan(s) by the amount of the payment skipped and that interest will accrue on the deferred balance of the loan throughout the deferred payment period. Certain restrictions may apply. By signing and returning this form, you are requesting Credit Union of Georgia to advance the due date equal to one month's payment on each of your eligible loans which you have listed. There is a \$35 processing fee per loan that will be deducted from your account or collected at time of form submission. Loans must be current at the time the payment holiday form is received or the request will not be processed. Single Payment, Home Equity, HELOC, Student Loans and Real Estate are not eligible for Skip-A-Pay.

Member Signature _____ Date _____

CREDIT UNION OF GEORGIA USE ONLY			
Date Received _____	MSR# _____	Initials _____	Date Processed _____