



# California Lithuanian Credit Union

2806 Santa Monica Blvd., Santa Monica, CA 90404

Phone: (310) 828-7095 Fax (310) 828-0891

<b>STOP PAYMENT REQUEST</b>			<b>Stop Fee \$</b>
<b>Account Number</b> #	<b>Check Number</b>	<b>Check Amount</b> \$	<b>Date of Check</b>
<b>Payable to:</b>		<b>Reason for Stopping Payment:</b>	
<small>I/We hereby agree that this stop payment order is binding upon CLCU only if it accurately and specifically states all of the information requested above, and it is received by CLCU in sufficient time to give CLCU a reasonable opportunity to act upon it. Such order expires six (6) months from the date it is received, unless it is renewed in writing. I/We agree to indemnify and hold CLCU harmless from all expenses and costs which it incurs due to its compliance with this order. In the event the above-described check is returned, I/We agree to notify you promptly and withdraw this stop payment request. FOR A STOP ON AN ELECTRONIC DEBIT (ACH) FOR THE REASON AUTHORIZATION REVOKED, I/We HAVE NOTIFIED THE ORIGINATING COMPANY</small>			
		<b>STOP PAYMENT REQUEST CANCELLATION/RENEWAL</b> This Stop Payment Request is hereby: (Check one only) <input type="checkbox"/> Cancelled <input type="checkbox"/> Renewed for an additional 6 months New expiration date:	
<b>Customer Signature</b>		<b>Customer's Signature for Cancellation/Renewal</b>	
<b>Date</b>			
<b>FOR CREDIT UNION USE ONLY</b>			
<b>Received By</b>	<b>Date/Time Received:</b>	<b>Order Entered By:</b>	<b>Confirmation #:</b>
	<b>Date/Time Entered:</b>	<b>Expiration Date:</b>	

Stop payment fees

Share drafts from personal account - \$20.00

Official CLCU drafts written from personal account - \$35.00