Mohave Community Federal Credit Union

SKIP A PAYMENT OPTION

Member Name:			Acct:	Loan:
Address:			Pł	n:
	I request the Skip a Payr			· · · · · · · · · · · · · · · · · · ·
	l understand there is a	\$50.00 for each skipp	ed loan payment	
	I have enclos	sed a Check/Cash for t	he amount due.	
	Please deduct the amount	due for my account: _	Savings	Checking
I agree to the follow	ring conditions:			
• This loan is	s 6 months or older.			
• This reque	st is on or before my scheduled due da	ate.		
My loan/a	ccount is current and in good standing			
				6
 Interest wi 	Il continue to accrue at the rate stated	l on my loan contract and	i my first payments a	after the extension will
	Il continue to accrue at the rate stated crued interest before principal.	l on my loan contract and	i my first payments a	after the extension will
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