



January 2019 SKIP-A-PAY

Primary Member Name: _____

Daytime Phone Number: _____

Member Number: _____

Loan suffix: L _____

Loan Suffix: L _____

Loan Suffix: L _____

I understand that skipping the January payment will extend my loan(s) by one month. This will not affect my loan payment record since the skipped January payment will be added to the loan. Interest will continue to be calculated on the outstanding balance. I understand that there is a fee of \$20 per loan skipped. All loans are current to my understanding.

\$20 fee to be deducted from Account # _____ Suffix # _____

I understand that I am skipping my _____ January Loan Payment
(Please initial)

X _____
(Signature) (Date)

Note: Skip-A-Pay will affect payouts for GAP claims made for totaled or stolen vehicles.

Member must have made three (3) consecutive months of payments. Loan must not have been 30 days late in the last 6 months. Loan term must be 60 months or less at original signing. For example 72 and 84 month term loans are ineligible.

Payment Saver, Advance PLUS, Real Estate, Modified Loans & Loan Workouts are not eligible for Skip-A-Pay.

Please mail to TCCU P.O. Box 4327, Torrance, CA 90510-4327 or FAX to (310) 618-6824

(FOR OFFICE USE ONLY)

Current on January Payment: \$ _____

\$20 fee was assessed to F&T - FS FU Teller's initials _____

Loan Officers Signature: X _____ Please remit before loan due date

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