



VOLUNTARY SKIP-A-PAY AUTHORIZATION

Member Name (please print) _____

Member Number _____

I understand that by skipping one month's payment on the loan(s) listed below, the terms of my loan will be extended by one month and interest will continue to accrue.

Please check one of the following payment options:

\$25 FEE REQUIRED AT TIME REQUEST SUBMITTED

1. I am paying with cash or check in the amount of \$25.00 for each loan skipped ()
2. Please debit my share or checking account for \$25.00 for each loan skipped ()

Circle One: share checking

Loan # _____ Loan # _____ Loan # _____ Loan # _____

Member Signature _____ date _____

By signing above, you authorize Northwest Arkansas Federal Credit Union to extend your final loan payment by one month. Interest will continue to accumulate on your loan during the month you skip your payment. Skipping a payment on your vehicle loan may result in an amount owing after GAP insurance has paid, if applicable.