

SKIP-A-PAYMENT

Now available when you need it the most!

You are invited to participate in our "When You Need It Skip-A-Payment" program. This offer is available to all members in good standing with no delinquent activity on their current loan payments. It does not apply to mortgage loans, Visa credit card payments or to our Loan 6 Overdraft Line of Credit. ***This option can be used up to 6 times during the life of a loan, but only 2 times per year.***

To qualify, you must be current on all your loans and you cannot have any current overdrafts on your account. You must have made at least six (6) consecutive payments on your loan before the first skip request can be approved. There must be at least one month between skip payments (i.e.: you can skip April and June payments, but you would not be allowed to skip April and May payments together.)

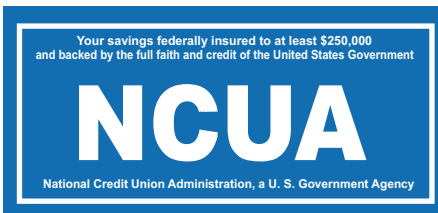
By signing the agreement below, you may elect to skip your payment for one month. Interest will accrue during the skipped month. No payment will be required. If your loan(s) payment is set up on payroll deduction there will be no need to change anything. Your funds will be available for withdrawal for you needs when the application is approved.

A \$25.00 Fee is assessed for each Skip-A-Payment request granted. No more than 2 skip-a-payments per loan per year. Other restrictions may apply. Please mail a check with the form below or make sure the funds are available in your account. No skip will be allowed without the appropriate fee payment. All Skip-A-Payment applications must be received at least 48 hours prior to the due date of the loan.

Yes, I want to participate in the CN/IC Employees Credit Union Skip-A-Payment Promotion by skipping one payment in the month of _____ on my qualifying loan(s). I understand interest will continue to accrue during this period and by skipping this payment, this payment will be added to the end of the loan thereby extending the final due date. A check for \$25.00 PER LOAN PAYMENT TO BE SKIPPED is enclosed. If not, please withdraw funds from my account to cover the fee. (Funds will be withdrawn from your regular share savings account first if available.)

Print Name Legibly Please _____

Member Signature _____



Date: _____ Account # _____

Phone: _____

Skip A Payment for Loan # _____, Loan # _____, Loan # _____ for the Month of _____, 20__.

FOR INTERNAL USE ONLY:

_____ Approved Loan # _____, _____, _____ (___ Cash/ ___ Transfer S-# ___)

_____ Disapproved Loan # _____, _____, _____

Reason: _____ Initials: _____