



SKIP-A-PAY REQUEST FORM

*The following loans are ineligible for Skip-A-Pay: Real Estate Loans/Line of Credit Loans/VISA Credit Card Loans.

By signing below I/we agree to the terms and conditions of the Skip-A-Pay Promotion being offered by Port City FCU. I/we understand that there is a \$ 25.00 fee for each payment skipped and that the skipped payment will extend the term of the loan and interest will continue to accrue.

NAME _____

LOAN NUMBER _____ PAYMENT _____ ACCOUNT NUMBER _____

Note: You may only choose one month per loan.

LOAN NUMBER _____ PAYMENT _____ MONTH TO SKIP NOVEMBER 2020
 DECEMBER 2020
 JANUARY 2021

LOAN NUMBER _____ PAYMENT _____ MONTH TO SKIP NOVEMBER 2020
 DECEMBER 2020
 JANUARY 2021

Enclosed is a check for \$ 25.00 per loan skipped
 Please transfer \$ 25.00 per loan skipped from my

Savings
 Checking

MONTH TO SKIP NOVEMBER 2020
 DECEMBER 2020
 JANUARY 2021

SIGNATURE _____

DATE

CO-BORROWER SIGNATURE (IF APPLICABLE) DATE