

# Central Nebraska Federal Credit Union Skip-A-Payment Program

Member Name:

Account Number:

Loan Number:

Loan Type (auto, etc.):

Please pay the \$25 fee:

Enclosed (checks made payable to Central Nebraska FCU)

Withdrawal \$25 from  Savings  Checking

Account Number \_\_\_\_\_

By signing below you agree to amend the terms of your original agreement and to repay the entire balance of \$ \_\_\_\_\_ plus interest at \_\_\_\_\_ % by paying \$ \_\_\_\_\_ (payment amount) every \_\_\_\_\_ (payment frequency) beginning \_\_\_\_\_ (date).

Borrower Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Borrower Signature \_\_\_\_\_ Date \_\_\_\_\_

Loan Officer Signature \_\_\_\_\_ Date \_\_\_\_\_

Processed by \_\_\_\_\_ Date \_\_\_\_\_