



MEDIA CITY
Community Credit Union

1020 W. Olive Avenue • Burbank, CA 91506
T: 818.238.2950 • F: 818.238.2979
mediacitycu.org

Check Stop Payment Request

Media City Community Credit Union is hereby directed to attempt to stop payment on the following check(s):

SINGLE Check Stop Payment on Account: _____

Check # _____ Amount: _____ Date Issued: _____

Payee: _____

Reason for Stop Payment: Lost Stolen Dispute Other _____

RANGE Check Stop Payment on Account: _____

Beginning (including) Check # _____ to Ending (including) Check # _____

Reason for Stop Payment: Lost Stolen Dispute Other _____

REVOKE Check Stop Payment on Account _____

Beginning (including) Check # _____ to Ending (including) Check # _____

I understand that the check numbers and amounts I list must be correct for the Stop Payment to take effect.

I understand that if Media City Community Credit Union has obligated itself to pay the check(s), pursuant to California Commercial Code, Section 4403, or a third person becomes the holder in due course of the check(s), that Media City Community Credit Union may be obligated to pay the check(s).

I agree to indemnify Media City Community Credit Union against any and all liability, loss, costs, damages, fees of attorneys, and other expenses, including but not limited to any amount you are obligated to pay on the check(s), which Media City Community Credit Union may sustain or incur in consequence of honoring this Request to Stop Payment.

I understand that this request for the Stop Payment expires and is of no further effect six months from the date hereof.

I understand that Media City Community Credit Union will not be liable for paying any check(s) on the day the Request for Stop Payment is received.

I understand that a **\$25.00** fee will be assessed to implement a stop payment request.

I understand that a **\$10.00** fee will be assessed to revoke a stop payment request.

Member Signature

Date

Please fax this form to Media City Community Credit Union (818) 238-2979

- For Credit Union Use Only -

Teller ID: _____ Stop Date: _____ Revoke Date: _____ Verbal Request *Expire in 14 days