

## December 2024 Skip-A-Pay

With this offer you can skip your December loan payment(s) for a processing fee of \$35 per loan. Just complete this form and return it to the credit union at least 7 days before your due date. Act today! This offer is only good for December 2024 payments.

Please print or type clearly.	
Member Name	Member Account#
Address	
Loan#	
Loan#	Payment Amount
Loan#	Payment Amount
Method of payment for the processing fee(s) (ini	
Check Enclosed Deduct from	Savings Deduct from Checking
This offer is good for December 2024 payments only. All payments must be current to qualify for Skip-A-Pay. Loan must have had at least the first six full payments made to qualify. Only the equivalent of one month's payment may be skipped per loan.	
this action will extend the term of my/our loan(s) indicated by on loan agreement(s) during and after this time on the balance, and order to pay off the loan(s). I/We will be required to resume my/coverage will not be extended beyond the original maturity date. responsible for stopping that payment for December 2024. I/We requested. This form must be completed, signed by all parties on	ryment on the qualifying consumer loan(s) I/We have listed. I/We understand that he month, interest will continue to accrue at the rate provided in my/our original that skipping this payment will require me/us to make additional payments in our payments the following month. If I/we elected GAP or Warranty Coverage the. If I/we make my/our payments via another financial institution I/we will be also understand that I/We will pay a total processing fee of \$35 for each loan the loan and submitted at least 7 days before payment due date in order to proval. All loan(s) must be current (have no amount past due) to accept this offer.
loan(s) referenced here by one month. This extension in no way	able) hereby makes application to extend the original repayment terms of the otherwise alters the original terms and conditions of the loan contract as crue on the unpaid balance of the loan at the agreed rate. All parties who ay application.
Borrower Signature	Date of request
Co-Borrower Signature	
• •	te at swofcu.com. You may fax the form to (580)248-8149, Liberty Ave, Lawton Ok 73507. For questions, please contact
Loan Officer Approved Deni	ied Date