



Please skip the following payment(s) on my loan(s) at CUP Federal Credit Union:

		Loan #	Skip Month (Oct, Nov, Dec, or Jan)Skip Month (Oct, Nov, Dec, or Jan)	
		Loan #		
I understand that by st the term of the loan.	kipping a payment on my loa	an, interest will continue to	accrue on the unpaid balance and the sk	kipped payment will extend
Borrower Name (Print)		Account #	Day Phone #	
Borrower Signature			Date	-
Co-Borrower Signatur	e		Date	
IMPORTANT: All indiv	viduals who signed on the o	riginal loan, including joint	borrowers and cosigners, must sign this	s request.
 When you sl If you have p This form monoccurring. If my autom happen. Mail or Fax t 	kip a payment, your loan ter payroll deduction or automa ust be received <u>at least 15 do</u> atic payment is deducted fro the completed form to: PO E	m will be extended. Interectic savings to loan transfer, ays before the requested skip another bank or credit under 50526, Provo, UT 84605	ny currently delinquent loan, first payme st continues to accrue during the skipped the funds will remain in your account. The payment date in order for us to stop a nion, you will need to contact them to e 1-0526 Fax 801.374.1172	d period. automatic payments from ensure the payment does not
Approved Date	FM Processed		LO	