Revised 01/01/2024

Southland Federal Credit Union

Skip–a–Payment Request Form

Name: ______________________________ Account # __________ Loan # ______
(Please print)

I am requesting to skip my loan payment for the month of ___________________

I understand to qualify for a skip-a-payment request, I must be a member in good standing with Southland Federal Credit Union (SFCU) at the time of the request.

I further understand that I must give my request at least 10 business days before my loan payment due date to give SFCU staff time to process my request.

Member Signature: _________________________________ Date: ____________

Phone # _____________________ Email: _________________________________

Credit Union Use Only

[__________] Verify member in good standing

[_______] Advance loan due date

[________] NOTIFY MEMBER

[____] File copy in member loan file

Processed by: _________________________

Date: ________________

Quality Control verified by employee: ___________

Date: ________________

"Where People helping People really matters!"

effective: 01/01/2024