



# Skip-A-Pay

## Authorization Form

Free up extra cash for the holiday season with Skip-A-Pay. Simply return this form with the \$50 processing fee and we will defer the next payment due until the end of the loan term. \*

<b>Name:</b>	<b>Email:</b>
<b>Phone:</b>	<b>Address:</b>
<b>Loan Number:</b>	

If your loan is set up on an automatic charge from a checking or savings account, please check the appropriate box:  Bank of Commerce  Other Bank \_\_\_\_\_

<p><b>Choose Payment Month to Skip</b></p> <p><input type="checkbox"/> November <input type="checkbox"/> December <input type="checkbox"/> January</p> <p>Return completed form at least 3 days prior to payment due date.</p>	<p><b>Processing Fee</b></p> <p><input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Debit my BOC acct.</p> <p>Acct # _____</p>
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*\*Processing fee is not an interest payment and interest will continue to accrue on your loan balance. To participate, all loans with us must be current and in good standing. Participating in the Skip-A-Pay offer is voluntary. All requests are subject to review and approval. Please return completed form and \$50 processing fee per loan at least three days prior to payment due date. Additional forms are available at the bank or by visiting [www.bocrawlins.com](http://www.bocrawlins.com).*

### Acknowledgement

*I understand the processing fee is in exchange for deferring a loan payment and will not reduce the principal balance of my loan, nor will the fee apply to interest. I understand this payment deferral may cause an increase in the final payment of my loan. Some restrictions may apply. Signatures of all parties on the loan must be included. This offer is subject to approval and expires January 31, 2024.*

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

### Office Use Only

Received by _____	Date _____	Approved by _____	Date _____
Processing Fee <input type="checkbox"/> Cash <input type="checkbox"/> Check# _____ <input type="checkbox"/> Debit Acct. <input type="checkbox"/> EFT/ACH Process Date _____ Completed by _____			