



Mtnc _____ Fee ____

I am requesting a skip a Payment for my Loan(s) with DSFCU.

Federal Credit	J _{nion} for my	y Loan(s) with DSFCU.
l am requesting a skip(s) on Loan(s) #: #:#:		
For The Month of No \$25.00 fee from Cl		
Name (please print):	Account:
Phone:	Email:_	
Signature:		
Date:		
	Minimum 90 Day/ lest cannot be gran Delta Schools FC	ortgages, HELOC, CUDL or Visa.* 3 month payment history ted you will receive notification EU is always here to
		our financial needs
Collateral	Blue Book	Approved/Denied