



**I am requesting a Skip a Payment for my Loan(s) with DSFCU  
Delta Schools Federal Credit Union**

*Account Number :* \_\_\_\_\_

**Loan Information**

I am requesting a skip(s) on Loan(s) #: \_\_\_\_\_ #: \_\_\_\_\_ #: \_\_\_\_\_

For The Month of: \_\_\_\_\_

\$25.00 fee from Checking \_\_\_\_\_ Savings \_\_\_\_\_

**Member Information**

Name (please print): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Not applicable to First Mortgages, HELOC, CUDL, or Visa.  
A minimum payment history of 90 days or 3 months is required.**

*Delta Schools FCU is always here to help you with your financial needs*

**For credit union use:**

Collateral \_\_\_\_\_ Blue Book \_\_\_\_\_ Approved/Denied \_\_\_\_\_

Mtnc \_\_\_\_\_ Fee \_\_\_\_\_