es! I want to schedule my Skip-a-Payment!	Account Number:	
Please take the \$25.00 processing/loan extension fee per loan from:	Name:	_ Phone:
My NUFCU Savings Account	Loan Number/Description:	
My NUFCU Checking Account  Note: If we are unable to charge the fee to an account at NUFCU, the	Defer my loan for the month of:	
	Payment Amount:	
skip-a-payment will not be processed.	(Note: Payroll deduction will not change. The amount will be credited to you	ır share savings account.)
Terms of Agreement: By signing below, I accept this skip-a-payment proon the outstanding balance of my loan until it is paid in full. I understand principal and interest of my loan, and that I will be responsible to make the principal and interest is paid in full. For my loan to qualify, NUFCU must and in good standing, and not have received any payment extensions in the requests are subject to final approval of NUFCU. This offer does not apply Open End loans, Auto Advantage, NUFCU Certified Loans or Overdraft Profit in advance of payment due date.	If that I continue to be responsible for the entire outstanding he monthly payments after the original maturity date until all receive 6 monthly on time payments. The account must be current he previous 12 months. Some restrictions may apply and all to Real Estate Secured loans, Home Equity Line of Credit loans,	University of Nebraska FEDERAL CREDIT UNION 1720 P Street IPO Box 82847 Lincoln, NE 68501-2847 Federally insured by NCUA.
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\*Signature of Co-Applicant

Date

Date

Signature of Applicant

<sup>\*</sup>All persons obligated on the loan(s) must sign this request.