



**Educational & Governmental**  
EMPLOYEES FEDERAL CREDIT UNION

333 North Central Avenue • Second Floor • Hartsdale, New York 10530 • Phone: (914) 946-6200 • Fax: (914) 946-2910  
Branch Office: 22 West 1st Street • Room 311 • Mt. Vernon, New York 10550 • Phone: (914) 664-2646 • Fax: (914) 664-7991

**Stop Payment Request and Indemnification Agreement**

AGREEMENT made \_\_\_\_\_ between EDUCATIONAL & GOVERNMENTAL  
EMPLOYEES FEDERAL CREDIT UNION and \_\_\_\_\_  
(member)

NOW, THEREFORE, IT IS AGREED between the undersigned as follows:

1. Check number \_\_\_\_\_ was drawn on account number \_\_\_\_\_ at Credit Union in the amount of  
\$ \_\_\_\_\_, dated \_\_\_\_\_, made payable to \_\_\_\_\_

and was issued to Member at the request of an upon payment from Member.

2. That Member hereby requests Credit Union to issue a stop payment order on the Teller's check.

3. That in order to induce Credit Union to issue such a stop payment order and in consideration for the Credit Union's issuance of a stop payment, Member agrees to save and hold harmless Credit Union, its successors and assigns, from and against any liability, damage, claim, loss or proceeding made or brought upon Credit Union which it may suffer as a result of issuing the stop payment on the Teller's check.

4. That Member shall furnish, upon demand, a bond or other security as Credit Union may deem necessary to protect the Credit Union's interest under this Agreement.

5. In the event the Teller's Check shall hereafter come into the possession of Member, Member agrees to return the Teller's Check to Credit Union.

EDUCATIONAL & GOVERNMENTAL  
EMPLOYEES FEDERAL CREDIT UNION

\_\_\_\_\_  
Member Signature

BY: \_\_\_\_\_

\_\_\_\_\_  
Print Member Name

Name: \_\_\_\_\_

Title: \_\_\_\_\_