

FedACH[®] Participation Agreement

Part 3A: Receipt Options

Table R.4 – Participating Institution Item Type Receipt Sort Options

*Required Fields

Section 1: Service Description and Form Instructions

Complete this table if your Participating institution will use multiple Receiving Points to receive different item types.

Important: **Receiving Point** is defined as the entity that owns the electronic connection that is used to receive ACH files from the Reserve Bank.

If the Participant elects to receive any item types the Participant must complete Table R.1 to establish itself as a Receiving Point. If the Participating Institution will use different Service Providers for different item types, a separate Table R.4 must be submitted for each Service Provider.

For detailed instructions on completing this agreement, please refer to the [Participation Agreement Instructions](#) located at FRBServices.org.

For additional assistance completing and/or submitting this form, please contact Federal Reserve Bank Sales Support at 800-257-6701.

Send completed forms to Customer Contact Center at:
ccc.bankservices@kc.frb.org.

Section 2: Customer Information

Participating Institution Name*					
Identification Number (RTN/ETI)*					
Contact Name*	<i>First</i>	<i>MI</i>	<i>Last</i>		
Contact Phone Number*	<i>Country Code</i>	<i>Phone</i>		<i>Extension</i>	
Contact Email Address*					

Section 3: Service Specific Information / Customer Specific Requests

Requested Effective Date* (ACH Process Date) <i>(Must be received by the Reserve Bank at least ten business days prior to the requested effective date. Actual effective date may vary from requested date.)</i>	
Action* <i>Select ONE option.</i>	<input type="checkbox"/> Receive ACH government items only <input type="checkbox"/> Receive ACH government and commercial items

3.1 Item Type Receipt Table

Item Type	Send to Either:	
	Participating Institution RTN/ETI	Service Provider RTN/ETI
401 – Corporate Government	<input type="checkbox"/>	<input type="checkbox"/>
402 – Corporate Commercial	<input type="checkbox"/>	<input type="checkbox"/>
403 – Consumer Government	<input type="checkbox"/>	<input type="checkbox"/>
404 – Consumer Commercial	<input type="checkbox"/>	<input type="checkbox"/>
405 – Returns and Rejects	<input type="checkbox"/>	<input type="checkbox"/>
406 – Notification of Change and Death Notification Entries	<input type="checkbox"/>	<input type="checkbox"/>
407 – International ACH Transactions, Truncation and Destroyed Check Entries	<input type="checkbox"/>	<input type="checkbox"/>

3.2 Optional Item Type Files¹ (if applicable)

A Service Provider that is a Receiving Point and has been designated to receive Participating Institution's 405, 406 or 407 item types may elect to receive such item types in a separate 405, 406 or 407 item type file. **A separate charge applies for the 407 files.**

A Service Provider that elects one of these files will receive a file containing only the Participating Institution's 405, 406 or 407 item types. Any other item types that the Participating Institution has designated a Service Provider to receive will be delivered according to Service Provider's default file delivery instructions.

Item Type File <i>Select ONE option.</i>	<input type="checkbox"/> Service Provider elects to receive Participating Institution's 405 items in a discrete file. <input type="checkbox"/> Service Provider elects to receive Participating Institution's 406 items in a discrete file. <input type="checkbox"/> Service Provider elects to receive Participating Institution's 407 items in a discrete file.
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¹ Optional Item Type Files are not available to Participating Institutions that serve as their own Receiving Point.

3.3 Designate or Delete Service Provider (if applicable)

For a Participating Institution that designated in the table above item types to be delivered to a Service Provider, select “Add” and provide Service Provider name and information in Section 4 below. If the Participating Institution will use different Service Providers for different item types, a separate Table R.4 must be submitted for each Service Provider.

Participating Institution designates the entity named below as its Service Provider and, with respect to the Item Type(s) designated to be delivered to the Service Provider, authorizes:

- the Service Provider to serve as Participating Institution’s Receiving Point by receiving Participating Institution’s ACH Items from the Reserve Bank through an electronic connection that Service Provider owns;
- the Service Provider to designate another entity as Participating Institution’s Receiving Point;
- the Service Provider and any Receiving Point designated by the Service Provider to perform all the actions that a Receiving Point agent may perform on behalf of a receiving bank under Operating Circular 4, including, but not limited to, requesting remakes; and
- the Reserve Bank to act on the instructions of Service Provider and any Receiving Point designated by the Service Provider with respect to the handling of ACH items that the Reserve Bank sends to the Participating Institution.

To discontinue sending certain item types to a Service Provider, select “Delete” below. If a new Service Provider for these item types is not indicated, delivery will default to the Participating Institution. To replace a Service Provider for specified item types, select “Update” below. For all actions, indicate the item types impacted by the change. If the Participant is requesting all item types be delivered to one Service Provider, Table R.3 should be used.

<p>Action* <i>Select ONE option.</i></p>	<p><input type="checkbox"/> Add (<i>Participating Institution and Service Provider must complete and sign Authorized Approval section below.</i>)</p> <p><input type="checkbox"/> Update (<i>Participating Institution and Service Provider must complete and sign Authorized Approval section below.</i>)</p> <p><input type="checkbox"/> Delete (<i>Participating Institution ONLY must complete and sign Authorized Approval section below.</i>)</p>
<p>Item Type(s)*</p>	

Section 4: Authorized Approval

Participating Institution Authorized Approval

<p>Authorized Signer Name*</p>	<p><i>First</i></p>	<p><i>MI</i></p>	<p><i>Last</i></p>
<p>Authorized Signature* <i>(Authorized ACH signer on Official Authorization List)</i></p>			

Service Provider Authorized Approval

Service Provider Name*			
Identification Number (RTN/ETI)*			
Contact Name*	<i>First</i>	<i>MI</i>	<i>Last</i>
Contact Phone Number*	<i>Country Code</i>	<i>Phone</i>	<i>Extension</i>
Contact Email Address*			
Authorized Signer Name*	<i>First</i>	<i>MI</i>	<i>Last</i>
Authorized Signature* <i>(Authorized ACH signer on Official Authorization List)</i>			

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