



Federal Reserve Bank Delivery Instructions for Paper Check Items

FRBservices.org

Federal Reserve Banks provide Check Services according to the terms and conditions of Operating Circular 3. To the extent this Agreement conflicts with any of the terms and conditions of Operating Circular 3, Operating Circular 3 governs.

Section 1 – Financial Institution Information

Required to be completed by the requesting financial institution

*** Required Fields**

Requested Effective Date * <i>(10 business days minimum lead time)</i>			
Financial Institution Routing Transit Number (RTN) *			
Financial Institution Name *			
Authorized Contact Name *	<i>First</i>	<i>Middle Initial</i>	<i>Last</i>
Authorized Contact Telephone Number *	<i>Phone</i>		<i>Extension</i>
Authorized Contact Email Address *			
Authorized Contact Signature * <i>(must be on Official Authorization List)</i>			

Section 2 – Delivery to Self *(to be completed only if items are to be delivered directly to your Institution)*

We request that the Federal Reserve Bank deliver this Institution's paper Check items as follows:

<input type="checkbox"/> Forward item paper cash letters (in-clearings) - including exception items that cannot be imaged		
Attention (department name only)		
Address		
City		
State & Zip Code	<i>State</i>	<i>Zip Code</i>
E-mail address		

<input type="checkbox"/> Return item paper cash letters (chargebacks) - including exception items that cannot be imaged <input type="checkbox"/> Same as Forward		
Attention (department name only)		
Address		
City		
State & Zip Code	<i>State</i>	<i>Zip Code</i>
E-mail address		

FRB pays for delivery to a single site. The Institution will be billed for delivery to additional addresses, based on transportation costs; this charge, if applicable, will appear on the monthly billing statement.

Federal Reserve Bank Delivery Instructions for Paper Check Items

Section 3 – Delivery to Processor *(to be completed only if items are to be delivered to your Processor)*

We request that the Federal Reserve Bank deliver this Institution’s paper Check items to the Processor named below:

Processor Name		
Processor 9 Digit Routing Number (RTN)		
Processor Address		
Processor City		
Processor State & Zip Code	State	Zip Code
Processor Phone Number		Extension
Processor Authorized Contact Name		
Title		
Processor Authorized Signature		
Date		
<input type="checkbox"/> Forward item paper cash letters (in-clearings) – including exception items that cannot be imaged <input type="checkbox"/> Return item paper cash letters (chargebacks) – including exception items that cannot be imaged Processor Delivery Sort Type - Items should be (choose only one): <input type="checkbox"/> Separately Sorted (each cash letter contains items drawn on only one institution) Or <input type="checkbox"/> Commingled with _____ (items drawn on multiple routing numbers/institutions are contained within the same cash paper letter)		

Section 4 – Additional Routing Transit Numbers *(to be completed only if applicable)*

Section 5 – Additional Instructions/Comments