



**Federal Reserve Bank**  
**FedACH® Return Item Exception Fax Form for IAT Items**

*Fax completed form to (612)204-5575*

This form should only be used if FedPhone, FedLine® Web or FedLine® are not options. The Processing Fee for this exception form is \$30 per item. You will receive a call within 24 hours to confirm this transaction. If you do not receive a call, please call **1-866-234-5681**. To guarantee same-day settlement, paper/fax returns must be received by 7:00am CT. We cannot process this form until this confirmation is completed.

Any field that contained data on the original item must be completed on this form.

Transaction Code <i>Must reflect the original transaction/account type</i>			
Standard Entry Class (SEC) Code			
Foreign Exchange Indicator			
Company Entry Description			
Foreign Exchange Reference Indicator			
Original 15 Digit Trace Number			
Foreign Exchange Reference			
DFI Account Number <i>Receiver's Account Number</i>			
ISO Destination Country Code			
Effective Entry Date			
ISO Orig Currency Code			
Dollar Amount			
ISO Dest Currency Code			
GO / Orig DFI ID			
GO / Recv DFI ID			
Number of Addenda Records			
Trans Type Code			
Foreign Payment Amount			
Foreign Trace Number			
Return Reason Code			
Addenda Info			
Date of Death			
<b>IAT ORIGINATOR INFORMATION</b>		<b>IAT ODFI INFORMATION</b>	
Name		DFI Name	
ID		DFI ID	
Street Address		DFI ID Qualifier	
City, St / Prov		DFI Branch CO Code	
CO & PO Code			
<b>IAT RECEIVER INFORMATION</b>		<b>IAT RDFI INFORMATION</b>	
Name		DFI Name	
ID		DFI ID	
Street Address		DFI ID Qualifier	
City, St / Prov		DFI Branch CO Code	
CO & PO Code			
<b>RDFI Routing Number no dashes</b>			
<b>Form Completed by</b>			
<b>Telephone Number</b>			

<b>Timestamp</b>	<b>Federal Reserve Use Only</b> Applicable fee: <input type="checkbox"/> Paper (30.00) <input type="checkbox"/> VR (6.00) <input type="checkbox"/> Web (.30) <input type="checkbox"/> No charge			
	Verified total: _____ Date: _____ Time: _____ Ext: _____			
<b>Restricted FR</b>	Customer Name: _____ Number Called: _____			
	FRB Contact: _____ Entered by: _____ Verified by: _____			
	<b>Customer:</b> Non-FLIS _____ FLIS _____ <b>FRB Entry:</b> JACADA _____ FLA _____ Other _____ <b>Duplicate VR:</b> _____			

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