



# Federal Reserve Bank Cross-Shipping Waiver Request

Servicing FRB Office: \_\_\_\_\_

[FRBservices.org](http://FRBservices.org)

## Federal Reserve Use Only

Date Notified: \_\_\_\_\_

FRB Contact: \_\_\_\_\_

DFI Contact: \_\_\_\_\_

Request Disposition: \_\_\_\_\_

### Section 1 – Financial Institution Information

**\* Required Fields**

Financial Institution Name*			
Routing (ABA) Number*	9-Digit ABA Number	4-Digit Branch Number	
Contact Name*	First	Middle Initial	Last
Title			
Telephone*	Phone	Extension	
Email Address*			

### Section 2 – Waiver Information

Time Period for Requested Waiver*	
Reason for Waiver* <i>Please describe the circumstances that led to this Cross-Shipping Waiver Request.</i>	
Impact Statement* <i>Please describe how the circumstances above affect your FedCash® operations from a Cross-Shipping standpoint.</i>	

### Section 3 – Authorized Signature

Name*	First	Middle Initial	Last
Title*			
Email Address*			
Signature*			
Date*			
Telephone*	Phone	Extension	

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