## THE FEDERAL RESERVE

- 🎯 Financial Services

# Federal Reserve Account Structure Guide, Attachment A – Subaccount Designations

#### **\*Required Fields**

## **Section 1: Financial Institution Information**

We designate the routing (ABA) number(s) in Section 2 to be a Subaccount(s) of our Master Account. (Attach additional sheets as needed.)

Routing (ABA) Number or Customer Identification Number (CIN)*				
Financial Institution (Master Account) Name*				
Street Address*				
City*				
State & Zip Code*	State			Zip Code
Official Signature <sup>*1</sup>				
Name*	First		МІ	Last
Title*				
Telephone*	Country Code	Phone		Extension
Requested Effective Date* <sup>2</sup>		•		•

- <sup>2</sup> The form is effective no earlier than the business day following the business day that the appropriate Federal Reserve Bank processes the request. If the requested Effective Date cannot be met, the company will be notified.
- www.FRBservices.org

<sup>&</sup>lt;sup>1</sup> Official signature must be a signer designated on your institution's Official Authorization List (OAL).

## **Section 2: Subaccount Information**

### Subaccount 1

Please select the applicable option*	<ul> <li>Add</li> <li>Convert to Other Secondary RTN</li> <li>Delete, with the intent to retire with LexisNexis</li> </ul>				
Used for Funds Transfers?*	☐ Yes ☐ No				
Secondary RTN (ABA)*					
Subaccount Name*					
Street Address*					
City*					
State & Zip Code*	State			Zip Code	
Contact Name*	First MI		МІ	Last	
Title*					
Telephone Number*	Country Code	Phone		Extension	

## Subaccount 2

Please Indicate if this is an Add, Change or Delete	Add     Convert to Other Secondary RTN     Delete, with the intent to retire with LexisNexis				
Used for Funds Transfers?	☐ Yes ☐ No				
Secondary RTN (ABA)					
Subaccount Name					
Street Address					
City					
State & Zip Code	State			Zip Code	
Contact Name	First N		МІ	Last	
Title					
Telephone Number	Country Code	Phone		Extension	

## Section 2: Subaccount Information (Continued)

#### Subaccount 3

Please Indicate if this is an Add, Change or Delete	Add Convert to Other Secondary RTN Delete, with the intent to retire with LexisNexis				
Used for Funds Transfers?	☐ Yes ☐ No				
Secondary RTN (ABA)					
Subaccount Name					
Street Address					
City					
State & Zip Code	State			Zip Code	
Contact Name	First MI		МІ	Last	
Title					
Telephone Number	Country Code	Phone		Extension	

The completed form should be e-mailed to <u>ccc.bankservices@kc.frb.org</u> or faxed to (877) 281-3647 and mailed to the Federal Reserve's Customer Contact Center at P.O. Box 219416, Kansas City, MO 64121-9416.

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Last updated: June 2023