



# Federal Reserve Bank FedACH<sup>®</sup> Participation Agreement

INTERNAL FR

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

## Part 6E: Designation of Service Participation Point

### General Instructions

1. Complete this page only if your institution will use a Service Participation Point to access and administer the FedPayments<sup>®</sup> Reporter or RDFI Alert Service.
2. This page is used only to designate or revoke a Service Participation Point for your institutions' FedPayments Reporter or RDFI Alert Service. To subscribe or unsubscribe from the FedPayments Reporter or RDFI Alert Service, use the appropriate service request form.
3. Complete Section A, or B, of this form, as applicable. If you need help determining which Section applies to your institution, see the FedACH Participation Agreement Instructions.

### Section A – Service Participation Point Owned by Your Institution

<b>Requested Effective Date (ACH Process Date)</b> <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>	
<b>Service Request</b>	<input type="checkbox"/> Add <i>(designate new Service Participation Point)</i> <input type="checkbox"/> Change <i>(change RTNs or services )</i> <input type="checkbox"/> Delete <i>(revoke a Service Participation Point)</i>

1. In Box A1, please list your institution's RTN through which the Service will be accessed and administered.
2. In Box A2, please list all RTNs for which the Service will be accessed and administered from the Service Participation Point listed in Box A1. For each RTN, indicate which service(s) the Service Participation Point will access and administer.

### Box A1 – Service Participation Point RTN

<b>Service Participation Point RTN</b>	
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**Box A2 – RTNs for which Service will be accessed**

RTN	Service		RTN	Service	
	FedPayments <sup>®</sup> Reporter	RDFI Alert		FedPayments <sup>®</sup> Reporter	RDFI Alert
1	<input type="checkbox"/>	<input type="checkbox"/>	6	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>	7	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>	8	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input type="checkbox"/>	9	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="checkbox"/>	<input type="checkbox"/>	10	<input type="checkbox"/>	<input type="checkbox"/>

**Part 6E: Designation of Service Participation Point**

Your institution hereby designates the electronic device that accesses the Reserve Bank's systems using the RTN listed in Box A1 as the Service Participation Point for the RTNs and services listed in Box A2.

**Participating Institution Authorized Signature**

Name of Participating Institution		Nine Digit RT/ETI	
Contact Name	Phone Number	Email Address	
Signature (authorized ACH signer on Official Authorization List)		Printed Name	

**Completed agreements can be faxed to 877-281-3647 or e-mailed to: [ccc.bankservices@kc.frb.org](mailto:ccc.bankservices@kc.frb.org)**