



Service Provider Agreement for the Fedwire® Funds Service and Fedwire Securities Service Operating Circular 6 – Appendix C

*Required Fields

Section 1: Service Description and Agreement Instructions

This Service Provider Agreement for the Fedwire Funds Service and Fedwire Securities Service is Appendix C to the Reserve Banks' Operating Circular 6, *Funds Transfers through the Fedwire Funds Service*. It is used by a financial institution that is a Fedwire Participant to authorize another entity to act as its Service Provider with respect to the Fedwire Funds Service and/or the Fedwire Securities Service. Unless otherwise stated, terms defined in Operating Circular 6 have the same meaning in this service provider agreement.

Section 3A of the agreement must be ink signed by an individual listed on your financial institution's Official Authorization List (OAL) and section 3B of the agreement must be ink signed by an individual listed on your Service Provider's OAL unless the Appropriate Reserve Bank Staff allows your financial institution and Service Provider to use electronic signatures. Please email the completed agreement to the Support Center at:

ccc.bankservices@kc.frb.org.

Please retain a copy of the completed agreement for your records. Any agreement that is incomplete will be returned to your institution.

For assistance completing this service provider agreement, please contact the Support Center at (833) FRS-SVCS (377-7827).

Section 2: Financial Institution & Service Provider Information

Financial Institution Name*			
Identification Number (RTN)*			
Street Address*			
City*			
State*			
Zip Code*			
Main Phone Number*	Country Code	Phone	Extension

Service Provider Name*			
Identification Number (RTN/ETI)* <i>Required only if Service Provider has an Identification Number</i>			
Street Address*			
City*			
State*			
Zip Code*			
Main Phone Number*	<i>Country Code</i>	<i>Phone</i>	<i>Extension</i>

Section 3: Service Specific Information

A. Financial Institution

In accordance with section 18 of Operating Circular 6, we designate the Service Provider named in section 2 as our Service Provider for the following service(s):

Production & Contingency

☐ Fedwire Funds Service

☐ Fedwire Securities Service

☐ Both

Contingency Only¹

☐ Fedwire Funds Service

☐ Fedwire Securities Service

☐ Both

We authorize the designated Service Provider to act on our behalf as specified in Operating Circular 6, including in selecting a security procedure. If the designated Service Provider will be operating outside the United States, we represent and warrant that our use of that Service Provider will not result in our noncompliance with any U.S. state or federal laws and regulations, including but not limited to privacy laws and the Bank Secrecy Act and regulations promulgated thereunder relating to recordkeeping.

The undersigned is signing this service provider agreement on behalf of the financial institution identified in section 2.

The signer of this service provider agreement must appear as an authorized individual on your financial institution's OAL currently on file with the Reserve Banks.

Authorized Signer Name*	<i>First</i>	<i>MI</i>	<i>Last</i>
Authorized Signer Title*			
Authorized Signer Email Address*			
Authorized Signer Phone Number*	<i>Country Code</i>	<i>Phone</i>	<i>Extension</i>
Authorized Signature*			
Date Signed*			

¹ If a Fedwire Participant intends to use its Service Provider for contingency purposes only, the Reserve Bank may send Messages and/or Securities Messages to the Fedwire Participant or the Service Provider.

B. Service Provider

We agree to the terms of Operating Circular 5 and of Operating Circular 6 and/or 7, as the case may be, and agree to act as a Service Provider for the financial institution identified in section 2.

The undersigned is signing this service provider agreement on behalf of the Service Provider identified in section 2.

The signer of this service provider agreement must appear as an authorized individual on the Service Provider's OAL currently on file with the Reserve Banks.

Authorized Signer Name*	First	MI	Last
Authorized Signer Title*			
Authorized Signer Email Address*			
Authorized Signer Phone Number*	Country Code	Phone	Extension
Authorized Signature*			
Date Signed*			

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