FEDERAL RESERVE



FINANCIAL SERVICES

## FedACH<sup>®</sup> Participation Agreement Part 2: Origination Options Table S.2 – Service Provider Designation

\*Required Fields

## Section 1: Service Description and Form Instructions

Participating Institution, an Originating Depository Financial Institution, designates the entity named below as its Service Provider and hereby authorizes:

- The Service Provider to serve as Participating Institution's Sending Point by sending Participating Institution's ACH Items to the Reserve Bank through an electronic connection that Service Provider owns;
- The Service Provider to designate another entity as Participating Institution's Sending Point;
- The Service Provider and any Sending Point designated by the Service Provider to perform all the actions that a Sending Point agent may perform on behalf of a sending bank under Operating Circular 4; and
- The Reserve Bank to act on the instructions of Service Provider with respect to the handling of ACH items sent to the Reserve Bank by a Sending Point designated by the Service Provider. Such instructions may include, but are not limited to, instructions regarding who should be contacted regarding file transmission issues.
- Participating Institution agrees to be bound by the acts and omissions of Service Provider, including the consequences of Service Provider's instructions regarding the handling of Participating Institution's ACH items.

For detailed instructions on completing this agreement, please refer to the **Participation Agreement Instructions** located at FRBServices.org.

For additional assistance completing and/or submitting this form, please contact Federal Reserve Bank Sales Support at 800-257-6701.

Send completed forms to Customer Contact Center at:

ccc.bankservices@kc.frb.org.

FRBServices.org Page 1 of 3

## **Section 2: Customer Information**

Participating Institution Name*					
Identification Number (RTN/ETI)*					
Contact Name*	First		МІ	Last	
Contact Phone Number*	Country Code	Phone			Extension
Contact Email Address*					

Section 3: Service Specific Information / Customer Specific Requests

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Requested Effective Date* (ACH Process Date) (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.)	
Action*	Add (Participating Institution and Service Provider must sign authorization boxes below.)  Delete (Participating Institution ONLY must complete Authorized Approval section below.)
Sending Point Name*	
Sending Point Nine Digit RTN/ETI*	
Additional Option (For Sending Points Only)	Service Provider elects to send files that identify this Participating Institution in the file header record.

## **Section 4: Authorized Approval**

**Participating Institution Authorized Approval** 

Authorized Signer Name*	First	МІ	Last
Authorized Signature* (Authorized ACH signer on Official Authorization List)			

FRBServices.org Page 2 of 3

**Service Provider Authorized Approval** 

Service Provider Name*					
Identification Number (RTN/ETI)*					
Contact Name*	First		МІ	Last	
Contact Phone Number*	Country Code	Phone	•		Extension
Contact Email Address*					
Authorized Signer Name*	First		МІ	Last	
Authorized Signature* (Authorized ACH signer on Official Authorization List)			•	•	

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Last updated: 08/01/2016 Version 5.0

FRBServices.org Page 3 of 3