

FedACH[®] Services

Return Item Exception Fax Form

* **Mandatory Fields (Mandatory for processing)**

** **Required Fields (Required by RDFI to process)**

*** **Optional Fields**

Section 1: Service Description and Form Instructions

This Exception Fax service is intended as a last resort when the electronic methods are not functional. The Processing Fee for submitting this exception form is listed at frbservices.org. You will receive a call within 24 hours to confirm this transaction. If you do not receive a call, please call **(877) 372-2457**. If you are requesting current day settlement, paper/fax returns must be received by 8:00 a.m. ET. An exception to this requirement will be made for the return of a forward item greater than \$10,000 received as a Same Day ACH item in the 12 noon ET distribution. Such returns must be received by 2:00 p.m. ET for 5:30 p.m. ET settlement on the same day. The Reserve Banks will make best efforts, subject to capacity constraints, to process the item but will not input the item into the FedACH application for processing until after the transaction is confirmed through the call back process and the information is released as an ACH file to the FedACH application for processing.

For additional assistance completing and/or submitting this form, please contact FedACH and Check Customer Support at (877) 372-2457.

Fax completed forms to ACH Exceptions at: (612) 629-4279

Section 2: Customer Information

Receiving Depository Financial Institution (RDFI) Name*			
RDFI Identification Number (RTN)*			
Contact Name for Individual Completing Form*	<i>First</i>	<i>MI</i>	<i>Last</i>
Contact Phone Number*	<i>Country Code</i>	<i>Phone</i>	<i>Extension</i>
Contact Email Address***			

Section 3: Return Item

Any field that contained data on the original item must be completed on this form.

Transaction Code * (Must reflect the original transaction/account type.)	
Standard Entry Class (SEC) Code *	
Company Entry Description *	
Original 15 Digit Trace Number *	
DFI Account Number ** (Receiver's Account Number)	
Effective Entry Date **	
Dollar Amount *	
Company Name *	
Company Disc Data ***	
Company ID *	
Company Descriptive Date ***	
Individual ID or Check Serial Number **	
Terminal City * (POP Items Only)	
Terminal State * (POP Items Only)	
Discretionary Data or Payment Type Code (Mandatory for WEB and POS items)*	
Individual or Receiving Company Name **	
Return Reason Code *	
Date of Death (For R14 and R15 returns only) *	

Federal Reserve Use Only

Application Fee: Paper Web No Charge

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