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# Fedwire® Funds Service – Payment Notification User Group Agreement For Nonparticipant Members Operating Circular 6 – Appendix E-2

Internal FR  
(Upon receipt by the  
Federal Reserve Bank)

## Section 1 – Agent Bank Information (must be Fedwire Funds Service Participant) \* Required Fields

Financial Institution Name * <i>(must match institution of authorized signer below)</i>			
Routing (ABA) Number *			
Requestor Name *	First	Middle Initial	Last
Telephone *	Phone		Extension
Email address to which PNUG Directory should be sent *			

## Section 2 – Nonparticipant Member Information and Sending Email Address

Nonparticipant Member 1:

Nonparticipant Member Name *			
Nonparticipant ID Number * <i>(Routing (ABA) Number, Bank Identifier Code (BIC), UID, or Other ID)</i>			
Request Effective Month * <i>(Refer to section 3.2 of Appendix E)</i>	Month	Year	
Email address from which payment notifications will be sent <i>(example: notify@firstbank.com)</i>	Email Address #1: *		
	Email Address #2: <i>(optional)</i>		

Nonparticipant Member 2 (As applicable):

Nonparticipant Member Name *			
Nonparticipant ID Number * <i>(Routing (ABA) Number, Bank Identifier Code (BIC), UID, or Other ID)</i>			
Request Effective Month * <i>(Refer to section 3.2 of Appendix E)</i>	Month	Year	
Email address from which payment notifications will be sent <i>(example: notify@firstbank.com)</i>	Email Address #1: *		
	Email Address #2: <i>(optional)</i>		

Nonparticipant Member 3 (As applicable):

Nonparticipant Member Name *			
Nonparticipant ID Number * <i>(Routing (ABA) Number, Bank Identifier Code (BIC), UID, or Other ID)</i>			
Request Effective Month * <i>(Refer to section 3.2 of Appendix E)</i>	Month	Year	
Email address from which payment notifications will be sent <i>(example: notify@firstbank.com)</i>	Email Address #1: *		
	Email Address #2: <i>(optional)</i>		

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## Section 3 – Terms

We, the financial institution identified in section 1 above, represent and warrant that we have the authority to act on behalf of the financial institutions identified in section 2 above with respect to Appendix E to your Operating Circular 6, including but not limited to the authority to request that you make each such financial institution a member of the Payment Notification User Group. We agree to the provisions of your Operating Circular 6, including Appendix E, as amended from time to time (including but not limited to the indemnification provisions in Appendix E relating to the financial institutions identified in section 2 above).

We represent that we have obtained a duly executed written agreement from each financial institution identified in section 2 in which the financial institution (i) has authorized us to act as Agent Bank for it, (ii) agrees to use best efforts to follow the Payment Notification Guidelines, as amended from time to time, which are published on FRBservices.org, and (iii) agrees to the provisions of Appendix E to your Operating Circular 6, as amended from time to time. We agree to furnish these written agreements to you or another Federal Reserve Bank upon request.

## Section 4 – Authorized Signature

The undersigned is signing this agreement on behalf of the financial institution identified in section 1 above. *This agreement must be signed by an individual listed on the Agent Bank's Official Authorization List (OAL).*

**\* Required Fields**

Name *	<i>First</i>	<i>Middle Initial</i>	<i>Last</i>
Title *			
Email Address *			
Signature *			
Date *			
Telephone	<i>Phone</i>	<i>Extension</i>	

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Please submit this form to the Customer Contact Center at:

Customer Contact Center  
Federal Reserve Bank of Kansas City  
P.O. Box 219416  
Kansas City, MO 64121-9416