



**Federal Reserve Bank
Expedited Recredit Claim**

Section 1 – Claim of Loss Amount and Item Detail

Item received as	<input type="checkbox"/> Substitute Check		
In a (Check One)	<input type="checkbox"/> Forward Cash Letter	<input type="checkbox"/> Return Letter	
Amount of Claim (<i>Must be at least \$25.01</i>)			
Date Became Aware of Claim			
Amount of Item			
Your Bank's Name			
Your Bank's 9 Digit Routing Number			
Received From			
Cash/Return Letter Dated			
Cash/Return Letter Total			
Tape Total			
Listed Between		and	
Sequence Number			
Drawer's/Maker's Account Number			
Check Number			
Payable To			

Section 2 – Description of the Consumer's Claim or the Warranty Claim

Describe the consumer's claim or the warranty claim related to the substitute check, including why your bank believes the substitute check item may not be properly charged against the consumer's account. Explain why the production of the original check or a sufficient copy of the original check is necessary to determine the validity of the charge to the consumer's account or the warranty claim.

Description of Claim:

Federal Reserve Bank

Expedited Recredit Claim

Bank's statement of why the substitute check may not be properly charged to the consumer's account:

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Explanation of why the original check or a sufficient copy is necessary to determine the validity of the charge or claim:

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Section 3 – Estimated Amount of Recredit or Loss

Describe whether your bank is obligated to recredit the consumer's account under Regulation CC Section 229.54 or whether, and how, your bank has otherwise suffered a loss. Provide an estimate of the amount of the recredit or loss, including interest, if applicable.

Check the appropriate box and provide the information requested.

<input type="checkbox"/> We are obligated to recredit the consumer's account.	
Date of Actual or Anticipated Recredit	
Amount of Recredit	
If the amount of the recredit includes interest, describe the applicable interest rate associated with the consumer's account, and the calculation used in arriving at the cost of interest:	

<input type="checkbox"/> We are not obligated to recredit the consumer's account, but have otherwise suffered a loss.	
Describe how your bank has suffered a loss	
Describe how the amount of the loss was calculated	

Section 4 – Attachments

Check the appropriate box and provide the applicable attachment.

Required Attachment	<input type="checkbox"/> Attach a complete copy of the consumer's claim that complies with Regulation CC, Section 229.54
If the consumer's claim cannot be attached, check applicable box	<input type="checkbox"/> The consumer filed an oral claim (no written claim is available) <input type="checkbox"/> The consumer did not file a claim
Optional Attachment	<input type="checkbox"/> Attach any other documentation or information that may be helpful in evaluating the validity or amount of this claim

Federal Reserve Bank Expedited Recredit Claim

We certify that, according to our records, we are entitled to make an Expedited Recredit Claim, the information contained in this Expedited Recredit Claim is accurate, and that we, or our customer, have suffered the loss as described in the claim.

Bank Name	
9 Digit Routing Number	
Name of Bank Contact	
Phone Number of Bank Contact	
Authorized Signature	
Date	

If the Reserve Bank does not receive all of the information requested within 120 calendar days of the date of the transaction that gave rise to the claim, the Reserve Bank will deny the expedited recredit request. In addition, the item must have been collected and/or returned through the Federal Reserve check collection system in order for a claim to be submitted. Knowingly making false statements to influence the action of a Federal Reserve Bank may subject the signing party to criminal penalties under federal and/or state law.