THE **FEDERAL RESERVE** *Grinancial Services*

FedACH® Exception Case Request

Todrion Excop		<u> </u>		7440		
*Required Fields						
Send completed forms as an attachmen	t to FRBExcep	<u>tionReque</u>	est@at	tl.frb.org		
Request Date*						
Section 1: Select a Case Type Note: The case type General (GNRL) is		r Federal F	Reser\	/e Bank-Of	fline Participants.	
					•	
Section 2: Requestor's Inforn	nation					
Requestor ABA*						
Contact Name*	First		МІ	Last	Last	
Telephone Number*	Country Code	Phone			Extension	
Email Address*						
Reference Number*						
Notes						
Attachments	Yes No No					
Section 3: ACH Transaction F Note: Request will be sent to the party in		l on the tra	ınsact	ion informa	ation provided in th	nis section.
Settlement Date*						
Processing Date*						
Trace Number*						
Amount*						
Originating Depository Financial Institution (ODFI) ABA						
Receiving Depository Financial Institution (RDFI) ABA						

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NOTE: Refer to the <u>FedACH Exception Resolution Service Quick Reference Guide (QRG)</u> for detailed information regarding the required fields for each case type. Absence of required field information will delay resolution.

EDD DEFEDENCE NUMBER (FDD U.s. Ouk.)		
FRB REFERENCE NUMBER (FRB Use Only)		

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