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In-house Statement Processing **Fax-Back** Instruction Form

Institution Name: _____ UCI: _____ Client #: _____

Contact: _____	Phone: _____	Cell: _____
Backup Contact: _____	Phone: _____	Cell: _____
Fax: _____	E-Mail: _____	

TURN AROUND TIME DOES NOT BEGIN UNTIL ALL NECESSARY COMPONENTS REQUIRED FOR PROCESSING ARE RECEIVED AT FISERV, INCLUDING THIS FORM, WHICH MUST BE COMPLETED AND SIGNED.

Data submittal for cycle ending: _____

Additional Inserts Information:

Please use this fax to let us know about inserts and again when you transmit data or ship tape

Physical inserts must be received by the 25th of the month any changes to this document (such as adding inserts) must be faxed to Fiserv as a revised Statement Form, and acknowledgment must be faxed back to you. Fiserv requests inserts in-house three days before data is received to check in inserts and stage for production.

Does this mailing use a Supervisory or Special Envelope? Yes No
 Does this months mailing require inserts? Yes No (if yes please fill in details below)
 If we run short of inserts, can we mail the remaining statements without an insert? Yes No
 Permission for mailing to go overweight (additional postage per stmt) Yes No

(Optional) Insert ID Code #	Insert Description	Quantity Supplied	# of Stmts. to Receive this Insert	*Leftover Material

Special instructions: _____

Please use the following highlighted descriptions when referring to "Leftover Material"

* RTW - return to warehouse. RECYCLE - throw away after completion of mailing. RTC - return to client.

Date: _____ **Signed:** _____