

“ATTACHMENT A”

Informatix, Inc.
Single State FI Data Match (SSFIDM)
Memorandum of Agreement

___ If you are going to participate in Multi-state FI data match (MSFIDM) please check. You do not need to fill out the memorandum of agreement or “Attachment A,” but you must return them with a letter from your FI indicating that you have chosen to participate in the Multi-state FI indicating that you have chosen to participate in the Multi-state FI data match (MSFIDM).

___ If you are going to participate in the Single state FI data match (SSFIDM), please check, and complete the following information along with the memorandum of agreement.

A. The FI must designate a contact person to perform the data match on its behalf by completing the information below.

Agent (if any): _____

FI: _____

Federal Identification Number: _____

Contact Person: _____

Title: _____

Street Address: _____

Mailing Address: _____

E-Mail: _____ FAX: _____

Telephone: _____

B. The FI must designate a contact person to receive all legal notices for encumbrances and surrender of accounts.

Contact Person: _____

Title: _____

Street Address: _____

Mailing Address: _____

E-Mail: _____ FAX: _____

Telephone: _____

MATCHED ACCOUNTS

The FI shall match an inquiry file supplied by the State against all customer accounts maintained by the FI. The FI must report all information required by the State on all customer accounts at the FI maintained by persons on the State's inquiry file. The FI must submit the report to the State within **45 days** of its receipt of the inquiry file. The inquiry file will be sent to the FI on an agreed upon date, and not more than quarterly thereafter. The State shall send its inquiry file on the designated medium. The inquiry file shall be destroyed or erased, or returned to the State along with the FI's report of all match accounts.

1. Please indicate the media for receiving and sending inquiry files for the State and for submitting accounts.

The FI will **receive** inquiry file from the State or its agent on:

____ Cartridge ____ Tape ____ Diskette ____ CD ____ Internet
3480,3490 Reel to Reel
4 mm DAT
8 mm DAT
SLR2, SLR 6

The FI will **send** accounts to the State or its agent on:

____ Cartridge ____ Tape ____ Diskette ____ CD ____ Internet
3480,3490 Reel to Reel
4 mm DAT
8 mm DAT
SLR2, SLR 6

Please indicate the week and month of the calendar quarter the FI will receive data to perform the data match.

Week: _____ Month: _____

(Name of FI)