## **Attachment A – Itemized Fees and Charges - Section 7**

Response Form – Banking Services

**Pricing List**

In addition to pricing for the specific services, noted below, please provide a complete schedule of fees that may be applicable.

|  |  |
| --- | --- |
| ACH Services |  |
| Payee Positive Payment Services |  |
| Mobile Banking Services |  |
| Data Transmission, Premium BAI2 statements |  |
| Overdraft Protection |  |
| Payroll Check Services |  |
| Wire Transfer Services |  |
| Merchant Services |  |
| ATM on College Campus |  |
| Fraud Protection |  |
| Data Security |  |
| Controlled Disbursement Accounts |  |
| Depository Account Services |  |
| Stop Payments |  |
| Web-based Information Reporting Services |  |
| Zero Balance Accounts |  |
| Loose Coin Deposits |  |
| Employee and Student Account Benefits |  |

Name of Proposer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*This form* ***must*** *be completed, signed and returned with your proposal to fulfill the requirements of this RFP.*