

**INTERAGENCY AGREEMENT  
FOR THE AGENCY UTILIZATION OF THE  
AUTOMATED CLEARING HOUSE (ACH)  
FOR ELECTRONIC FUNDS TRANSFERS**

1. The purpose of this agreement is to establish the roles and responsibilities of the (**agency name here**), regarding the use of ACH for electronic funds transfer activity, for all State Treasury ACH Network (STAN) applications used by the Agency.
2. The Agency agrees to comply with all ACH policies contained within Treasury's Cash Management Manual. The current policies are included as Exhibit A and are maintained and amended from time to time.
3. The "STAN Setup Form" will be used to document the Agency's critical setup options. These include, but are not limited to: internal control options, ACH transaction types, debit and credit origination, agency accounts, and transmission dollar limits.
4. The Agency must obtain approval from the Department of Administrative Services (DAS) before the Agency may originate ACH Credit transactions from accounts maintained on the Statewide Financial Management System (SFMS).
5. This agreement shall be effective upon execution by both Treasury and the Agency.
6. This agreement shall continue in effect until it is terminated by mutual written consent of the parties. In addition, either party may unilaterally terminate the agreement for any reason by providing at least thirty (30) days advance written notice to the other party, except that, Treasury may terminate this agreement at any time, if Treasury, in its sole discretion, determines that it is in the State's best interest to do so.
7. The agency shall be charged a fee for each ACH transaction in an amount reasonably determined by Treasury to cover costs as necessary to provide ACH services to Agency.
8. Treasury represents to the Agency that the person signing below on behalf of Treasury has full power and authority to execute this agreement and bind Treasury thereto. The Agency represents to Treasury that the person signing below on behalf of Agency had full power and authority to execute this agreement and bind the Agency thereto.

**Agency:**

\_\_\_\_\_  
Authorized Officer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed

\_\_\_\_\_  
Title

**Oregon State Treasury:**

\_\_\_\_\_  
Cora R. Parker  
Director of Finance

\_\_\_\_\_  
Date