

**[Financial Institution Name]**

[Address]

[City, State, Zip Code]

[Phone Number]

[Date]

**[Customer Name]**

[Customer Address]

[City, State, Zip Code]

**Re: Notice of Resolution Regarding Substitute Check Expedited Recredit Claim**

Dear [Customer Name],

We are writing to inform you that we have completed our investigation regarding the Expedited Recredit claim you submitted on [Date of Claim] concerning the following substitute check:

- **Check Number:** [Check Number]
- **Account Number:** [Account Number]
- **Claim Amount:** \$[Amount]

**[Select the appropriate resolution option below:]**

**[Option 1: Claim Approved]**

Based on our investigation, we have determined that your claim is valid. A permanent credit in the amount of \$[Amount] was posted to your account on [Date]. This amount represents the full recovery of the funds related to this claim.

**[Option 2: Claim Denied]**

Based on our investigation, we have determined that your claim is not valid. No credit will be issued to your account for this item. Our decision is based on the following: [Insert brief explanation, e.g., the original check was correctly processed/the substitute check was not charged to your account twice].

**[Option 3: Reversal of Provisional Credit]**

Upon further investigation, we have determined that the provisional credit issued to your account on [Date] in the amount of \$[Amount] was not warranted. We will reverse this credit and withdraw the funds from your account on [Date].

If your claim was denied or a credit reversed, you have the right to request copies of the documents we relied upon during our investigation. Please contact us at [Phone Number] if you wish to receive these documents or if you have any further questions.

Sincerely,

[Name/Department]

[Financial Institution Name]