

**FEDERAL DEPOSIT INSURANCE CORPORATION**

Division of Finance  
550 17th Street NW, Washington, DC 20429

**DATE:** [Insert Date]

**TO:** Chief Executive Officer / Chief Financial Officer  
[Insert Institution Name]  
[Insert Institution Address]  
[Insert City, State, Zip Code]

**RE: NOTICE OF PROPOSED ASSESSMENT FOR DEPOSIT INSURANCE PREMIUM SHORTFALL**

**FDIC Certificate Number:** [Insert Certificate Number]

**Assessment Period:** [Insert Quarter/Year]

Dear Sir/Madam,

This letter serves as formal notice that the Federal Deposit Insurance Corporation (FDIC) has identified a shortfall in the deposit insurance assessment paid by [Insert Institution Name] for the period ending [Insert Date].

Based on our review of the Consolidated Reports of Condition and Income (Call Report) data and current assessment rate schedules, the proposed adjustment is as follows:

- **Previously Paid Assessment:** \$[Insert Amount]
- **Recalculated Required Assessment:** \$[Insert Amount]
- **Proposed Shortfall Amount:** \$[Insert Amount]

The shortfall is attributed to the following factor(s):

[Insert Brief Explanation, e.g., Adjustment to Risk-Based Category / Reporting Error / Assessment Base Calculation].

**Action Required:**

If you agree with this proposed assessment, no further action is required; the shortfall amount plus applicable interest will be collected via Automated Clearing House (ACH) on [Insert Date].

If you disagree with this finding, you must submit a formal request for review or a request for revision within [Insert Number] days of the date of this letter. Please include all supporting documentation and address your correspondence to the FDIC Division of Finance, Assessments Section.

For questions regarding this notice, please contact the FDIC Assessment Hotline at [Insert Phone Number] or email [Insert Email Address].

Sincerely,

[Insert Signature Name]

[Insert Title]

Division of Finance