

FEDWIRE WORKSHEET

(1) Date to Process Wire : ____ - ____ - ____
MM DD CCYY

(2) SENDER F.I. DATA (ODFI)

(4) BENEFICIARY DATA (BNF)

<i>Financial Institution Name/Address</i>	<i>Federal Agency Name/Location/Phone</i>
	USDA Rural Development Cash Management Branch Mail Code FC 363 P.O. Box 200011 St. Louis, MO 63120-0011

(3) FUNDS DATA (OGB)

(5) RECEIVER F.I. DATA (RDFI)

<i>Payor Information</i>	<i>Wire Field</i>	<i>Wire Data</i>	<i>Tag</i>
Bank Account No. _____	Routing Transit No.	021030004	(3400)/Field 1
Name on Acct : _____	Financial Institution:	TREAS NYC	(3400)/Field 2
Ttl Amt to Wire : \$ _____ . _____	Business Function Code:	CTR	(3600)
Financial Institution Name	Beneficiary ID:	D	(4200)/Field 1
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Account:	12200408	(4200)/Field 2
Routing Transit No.	Beneficiary Name:	TREASURY	(4200)/Field 3
	Beneficiary Addr /Line 1:	NY	(4200)/Field 4
	Beneficiary Addr /Line 2:	NY	(4200)/Field 5

(6) ORIGINATOR to BENEFICARY DATA

Required Info. by Originator: { } / Optional Info. Further Application Instructions: [] / Required Sign: ()				
N = Max. Numeric Digits / T = Max. Text Digits / D = Max. Numeric with 2 Pos. Decimal				
<i>Wire Field</i>	<i>Wire Data</i>	<i>Tag</i>	<i>Message for Wire (No spaces between Digits)</i>	
ORG (5000)				
Originator ID	1T	Field 1	D	
{Taxpayer ID No.}	2N (-) 7N	Field 2	____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ -	
{Borrower Name}	35T	Field 3	_____	
{Addr/Line1}	35T	Field 4	_____	
{Addr/Line2}	35T	Field 5	_____	
{City/State/Zip}	35T	Field 6	_____	
OBI (6000)				
{Borrower Ref./Case No.}		Field 1	____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ -	
{Loan Pgm-Amt}	3T Pgm (-) 11D Amt	Field 2	____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - /	
	(/) 3T Pgm (-) 11D Amt		____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - /	
{ [Loan Pgm-Amt] }	3T Pgm (-) 11D Amt	Field 3	____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - /	
	(/) 3T Pgm (-) 11D Amt		____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - /	
{ [Advice Memo] }	35T	Field 4	_____	

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0184. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Privacy Act Statement

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). The information requested on the form is required under various provisions of title 15 U.S.C. 1601, 12 CFR 205 and 31 CFR 202, for the purpose of providing the authority to the Department of Treasury to designate financial institutions to collect payments, by electronic means, from your account. The information will be used for identification with the records of the government agency and the financial institution to direct your payments to the point you authorize.