

UNITED STATES DEPARTMENT OF THE TREASURY
OFFICE OF FOREIGN ASSETS CONTROL
REPORT OF BLOCKED TRANSACTIONS

INSTITUTION INFORMATION

| | | | |
|-------------|---------|---------------------|------------------|
| INSTITUTION | | TYPE OF INSTITUTION | ADDRESS |
| CITY | STATE | CONTACT PERSON | TELEPHONE NUMBER |
| POSTAL CODE | COUNTRY | E-MAIL ADDRESS | FAX NUMBER |

TRANSACTION INFORMATION

| | | | |
|--|---------------------|--|--------------------------------------|
| AMOUNT BLOCKED | DATE OF TRANSACTION | DATE OF BLOCKING | PROGRAM OR REASON FOR BLOCKING FUNDS |
| ORIGINATOR NAME & ADDRESS | | ORIGINATING FINANCIAL INSTITUTION NAME & ADDRESS | |
| INTERMEDIARY FINANCIAL INSTITUTION(S) NAME & ADDRESS | | BENEFICIARY FINANCIAL INSTITUTION NAME & ADDRESS | |
| BENEFICIARY NAME & ADDRESS | | ADDITIONAL RELEVANT INFORMATION (USE PAGE 2 IF MORE SPACE IS NEEDED) | |
| ADDITIONAL DATA FOUND IN ORIGINATOR TO BENEFICIARY INFORMATION OR BANK TO BANK INFORMATION | | | |

PLEASE ATTACH A COPY OF PAYMENT INSTRUCTIONS AS PAGE 3 OF THIS FORM

PREPARER INFORMATION

| | | | |
|-----------|----------------|-----------------|---------------|
| SIGNATURE | NAME OF SIGNER | TITLE OF SIGNER | DATE PREPARED |
|-----------|----------------|-----------------|---------------|

**ADDITIONAL INFORMATION
(PLEASE INCLUDE PAYMENT INSTRUCTIONS AS A SEPARATE ATTACHMENT TO THIS DOCUMENT)**

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