



U.S. Victims of State Sponsored Terrorism Fund

Consent to Proposed Distribution Plan

OMB No. 1123-0013
Expires XX/XX/XXXX

Attached is the Proposed Distribution Plan submitted for compensation from the U.S. Victims of State Sponsored Terrorism Fund for the claim submitted on behalf of _____ (insert name of decedent Victim). By signing this Consent to Proposed Distribution Plan you agree to the allocation set forth in it.

Note: If any dispute exists over the terms of the Proposed Distribution Plan which cannot be resolved by the parties, the Special Master may deposit the eligible claim amount with a court of appropriate jurisdiction to adjudicate the distribution.

Claim Number: _____

Printed Name of Heir/Beneficiary: _____

Signature of Heir/Beneficiary: _____

Date: _____
(mm/dd/yyyy)