

**REPAYMENT OF FUNDS AND AGREEMENT CLOSURE
(Section 416(b)/Local and Regional Food Aid Procurement)**

TO: Director, Food Assistance Division
 USDA/Foreign Agricultural Service
 STOP 1034
 1400 Independence Avenue, SW
 Washington, DC 20250-1034

From:

Subject: Agreement _____, Budget Number _____,
 Country _____

In accordance with the above referenced Agreement and Budget, we request closure of this agreement and agree to reimburse the outstanding amount of funds in the amount of \$_____. This includes the deduction of **unspent** funds originally allocated for projects.

Repayment by wire transfer please use the following information:

ABA No.:	021-030-004		
Bank Name:	Treasury, NYC		
Type Code:	CTR		
Beneficiary (BNF):	Commodity Credit Corporation		
Account No. (ALC)	4992		
Bank to Bank Information (BBI):	Program Type:		
	Country Name:		
	Agreement No:		
	Type of Cost:	Administrative Expense	

Please notify Food Assistance Division either by phone (202) 720-4221 or by E-mail PPDED@fas.usda.gov when wire transfer has taken place.

Sincerely

For USDA use. _____ Branch Chief Date
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