ITEMIZED STATEMENT OF PAYMENTS--US COSTS FOR EXIM LONG-TERM GUARANTEES AND DIRECT LOANS



OMB No.: XXXX-XXXX

ITEMIZED STATEMENT OF PAYMENTS - US COSTS Long-Term Guarantees and Direct Loans

| EXIM Bank Transaction No: |
|------------------------------------|
| US Cost Request Number: |
| Exporter Name: |
| Exporter Address: |
| Supply Contract No(s): |
| Date of Exporter's Certificate(s): |
| NAICS: |

| Acquisition List No(s). | Invoice No. | Invoice Amount | Invoice Amount Paid | Acquisition List Description of Item | Bill of Lading No(s). | AES/ITN No(s). | Remarks/Comments |
|-------------------------|-------------|----------------|---------------------|--------------------------------------|-----------------------|----------------|------------------|
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |
| | | 0.00 | 0.00 | | | | |

| TOTAL INVOICE AMOUNT | 0.00 | 0.00 | TOTAL INVOICE AMOUNT PAID | INDICATE CURRENCY | |
|----------------------|------|------|----------------------------------|--|--|
| | | 0.00 | LESS Excluded Goods and Services | | |
| | | 0.00 | LESS Local Costs | | |
| | | 0.00 | LESS Other | <comments be="" entered="" for="" here="" less="" other="" to=""></comments> | |

| | | 0.00 | NET AMOUNT | |
|--------------------|--------|-------------------------|------------------------------|--|
| | | 0.0000000 | EXCHANGE RATE | |
| | | <mm dd="" yyyy=""></mm> | DATE OF CONVERSION | |
| | | 0.00% | DISBURSEMENT % | |
| TOTAL GROSS AMOUNT | \$0.00 | \$0.00 | TOTAL PAYMENTS IN US DOLLARS | |
| | | \$0.00 | LESS Other | <comments be="" entered="" for="" here="" less="" other="" to=""></comments> |
| | | \$0.00 | TOTAL FINANCED AMOUNT | |

Complete Reachback Determination Calculation only if applicable as per Instruction #7.

| 0.00% | Reachback Determination Percentage |
|--------|------------------------------------|
| \$0.00 | TOTAL FINANCED AMOUNT |

INSTRUCTIONS AND NOTES: LINK to exim.gov

For any questions about completing this form, contact Credit Administration at credit.administration@exim.gov.

Paperwork Reduction Act Statement: We estimate that it will take you about 150 minutes to complete this form. This includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to EXIM and the Office of Management and Budget, Paperwork Reduction Project OMB # XXXX-XXXX Washington, D.C. 20503.