UNITED STATES DEPARTMENT OF THE TREASUR	Y
OFFICE OF FOREIGN ASSETS CONTROL	
REPORT OF REJECTED TRANSACTIONS	

INSTITUTION INFORMATION								
INSTITUTION		TYPE OF INSTITUTION		ADDRESS				
CITY	STATE		CONTACT PERSON		TELEPHONE NUMBER			
POSTAL CODE	COUNTRY		E-MAIL ADDRESS		FAX NUMBER			
TRANSACTION INFORMATION								
			TRANSACTION DATE OF REJEC		ION			
						FOR REJECTING 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	A FOLING) IN ORIGI	NATOR TO BENEFIC	CIARY INFORMATIO	N OR BA	NK TO BANK		
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 INFOR	RMATION NAME OF SIGNER		TITLE OF SIGNER		DATE PREPARED			
				The state of the s				

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