

TREASURY FORFEITURE FUND

FPF Seizure #:

--	--	--	--

 -

--	--	--	--

 -

--	--	--	--	--	--	--	--

 -

--	--

SEACATS#					-					-						-		
----------	--	--	--	--	---	--	--	--	--	---	--	--	--	--	--	---	--	--

Date of Forfeiture: _____ DCR Deposit Date: _____

Cash Receipt Number : Sale #: - -

Special Instructions: _____

Amounts to be Refunded or Transferred:

Amount: _____

Pay To: _____

Address:

Amount:

Pay To:

Address:

Amount: _____

Pay To: _____

Address:

Amount:

Pay To:

Address:

CBP Headquarters Representative:

Name: _____

Signature & Date: _____

HQ:

Phone:

Title:

Fax:

SEIZURE#:

FUND:		COST CENTER: 98999000
FUNDS CENTER:	RM400	MATERIAL GROUP: 442
FUNCTIONAL AREA:	MA1199999988	AMOUNT:
ORDER:	ZFX5	

COST CENTER: 98999000

MATERIAL GROUP: 442

AMOUNT:

EOAF: Obligator - Signature/Date

EOAF: Certifier - Signature/Date

Accomplished by ARC:

ARC Signature and Date