

U.S. Office of Personnel Management
Confirmation of Intragovernmental Account Balances
Fiscal Year 2000
General Information

General Information

1. Agency Name.....

2. Contact Name..... 3. Phone.....

4. E-Mail Address..... 5. Fax.....

6. Mailing Address.....

Account Balances

7. Actual Cash Disbursements/Outlays to OPM:

7a. Government Contributions for Retirement, Health Benefits and Life Insurance..... \$ -

7b. Other Cash Disbursements/Outlays, provide detail on attachment (e.g. VSIP or Transfer)..... \$ -

7c. Total Cash Disbursements/Outlays to OPM (7a + 7b)..... \$ -

8. Payable to OPM at 9/30/2000 (2213G.24):

8a. Government Contributions for Retirement, Health Benefits and Life Insurance..... \$ -
Indicate by an "X" if work days ___ or calendar days ___ were used

8b. Other - provide detail on attachment (e.g. VSIP payable or Transfer)..... \$ -

8c. Total Ending Payable to OPM (8a + 8b)..... \$ -

9. Payable to OPM at 9/30/1999 (2210G.24):

9a. Government Contributions for Retirement, Health and Life Insurance..... \$ -
Indicate by an "X" if work days ___ or calendar days ___ were used

9b. Other - provide detail on attachment (e.g. VSIP payable or Transfer)..... \$ -

9c. Total Beginning Payable to OPM (9a + 9b)..... \$ -

10. Lines 7c plus 8c minus 9c \$ -

11. Balance in 6400G.24 per FY 2000 FACTS Reporting..... \$ -

12. Difference (line 10 minus line 11)..... \$ -

13. Explanation for line 12 (Use additional attachments, if necessary)

Name and Signature of Preparer

14. Prepared by: Title:

15. I hereby certify that the amounts above agree with the amounts reported to Treasury in the FY 2000 FACTS I submission.

16. Signature: Date:

By Email to (preferred):
 Finance @opm.gov or mjfinuca@opm.gov

and send the original completed form by fax to:
 U.S. Office of Personnel Management
 Attn: Mike Finucan
 Fax Number (202) 606-7944