**Procedure IV**

**Form C**

**STATEMENT OF UNCOMMITTED BALANCE**

**ON GRANT ACCOUNT NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BEFORE PROVIDING FOR PRESENT REQUEST**

**FOR LETTER OF CREDIT**

1. DISBURSEMENTS TO DATE

(Up to and including Claim No. )

2. Claims in transit (see details below)

3. Commercial Letters of Credit outstanding (see details below)

4. Unwithdrawn portion of existing "Local" Letter of Credit

(see details below) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. Total committed portion of grant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Amount of grant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 7. Uncommitted portion of grant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 8. Amount of this Letter of Credit request \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Terminal Disbursement date of this grant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Remarks (to include details of 2, 3 and 4) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Certification by Beneficiary:

I/We hereby certify that the above information is true and correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Beneficiary)

per: Authorised Representative

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature)