

Refund Request Worksheet

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Accounting code: 0XPQPQ0024PQPSCRTPUBLICUSDA/0203		Date:
Note: Please attach any documentation	that supports the refund	
Company Information		
Company or individual name:		
PCIT Org ID number:	Phone number:	
Contact person:	Contact email:	
Address:		
Reason for refund:		
	Payment type used to fund	PCIT
(Fully complete the appropria	ate payment type below. Worksheets wit	th missing information will be returned)
1. Physical check * Available only when ACH	or credit card refunds are possible. A current IRS	Form-W9 ¹ must be submitted with the refund request.
Financial institution name:		
Financial institution routing number	(RTN):	
Tax Identification Number (TIN):		
Depositor account title:		
Depositor account number:		
Refund amount:		
Accounting code: 0XPQPQ0024PQPSCF	RTPUBLICUSDA/0203	
Check number:		
2. Electronic check (ACH) * A current	IRS Form–W9 ¹ must be submitted with the refund	i request.
Financial institution name:		
Financial institution routing number (R	TN):	
Tax Identification Number (TIN):		
Depositor account title:		
Depositor account number:		
Refund amount:		
Pay.gov Tracking ID:		
3. Credit card †		
Name on card:		
Amount of original charges:	Amount of refund:	
Agency tracking ID:	Pay.gov tracking ID:	
Transaction date:		

* Allow 4-6 weeks for processing, † Allow 3-5 business days for processing

Privacy Act Statement: Collection of this information is authorized by 31 U.S.C. 3332(g), 3325(d), and 7701(c). The information will be used by the Government to make payments by electronic funds to a vendor. This information may also be used for income reporting and for collecting and reporting any delinquent amounts arising out of a vendor's relationship with the Government. Disclosure of the information by the vendor is mandatory. Failure to provide the requested information may result in the delay or withholding of payments to the vendor.

¹An IRS-Form W9 with instructions may be found on the IRS.gov website or https://www.irs.gov/pub/irs-pdf/fw9.pdf.