## PRESIDENTIAL RANK AWARD (PRA) EXPRESS BILLING FORM

(If total obligation exceeds \$3,000, Forms 7600 A/B are required in lieu of the Express Billing Form.)

	Requesting Agency Information								Servicing Agency Information						
*Obligating Document Number/Tracking Number									150019PRA						
*Department/Agency/Division Name									Office of Personnel Management Nat'l Background Investigtions Bureau (NBIB)						
*Address									1900 E Street NW, Room 6H31 Washington DC 20415						
*Agency Location Code (ALC)									24000001						
*Treasury Account Symbol (TAS)	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP ATA	<b>AID</b> 024	BPOA	EPOA		<b>MAIN</b> 4571	<b>SUB</b> 024
*Business Event Transaction Code (BETC)	DIS	В							COLL						
*Business Partner Number (BPN)								126536929							
Object Class Code (Optional)															
Additional Accounting Information (Optional)															
*Payment Method	Servicing Agency-Initiated IPAC														
*Total Number of Nominees								0							
Cost Per Nominee	\$1,220.00														
Total Obligation								\$0.00							
*Funds Approving Official															
Name									James Lar						
Title									Chief of Finance						
Telephone Number									(202) 606-1376						
Email Address Signature/Date									<u>James.Lan</u>	g@nt	oib.gov				
The Funds Approxing Officials cartify that the funds are a		. 1 .	. 1				. 1.0			. 0	.11 .	C T	. D		

The Funds Approving Officials certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in this form. The Requesting Agency Official signs to obligate funds. The Servicing Agency Official signs to bill, collect, and properly account for funds from the Requesting Agency for work completed under this request.