

Exhibit C

Freight Forwarder's Letterhead

Carrier's Broker Name
Address

Dear Carrier's Broker -

Your signature below confirms that all invoicing for freight services provided by Carrier Name was completed under [[Agreement Number]], WBSCM freight purchase order number(s) #####, for country name and PVO. To facilitate the de-obligation of unused balances associated with this contract please advise us as follows:

[[Carrier Name and/or Carrier's Broker's Name]], on behalf of [[Carrier's Name]], have submitted all invoices to and received payments required under the above agreement from USDA's Paying Office.

() YES () NO

Sincerely,

Freight Forwarder

Type or Print Name of Carrier or Authorized Representative

Signature of Carrier or Authorized Representative and Date

cc: USDA/FAS/TLB
PVO
Carrier