

Date: \_\_\_\_\_

Memorandum

To: National Business Center  
Payroll Operations  
P.O. Box 272030  
Mail Code: **D-2661**  
Denver, Colorado 80227

CC: Division of Financial Management  
4401 N. Fairfax Drive, MS 7029-43  
Arlington, VA 22203

From: Fish and Wildlife Service  
Region: \_\_\_\_\_

Subject: Report of Taxable Fringe Benefit (Telework Broadband Reimbursement)

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Employee Name: \_\_\_\_\_

Employee SSN: \_\_\_\_\_

Department: \_\_\_\_\_ Bureau: \_\_\_\_\_ Subbureau: \_\_\_\_\_

Amount of Entitlement: \$ \_\_\_\_\_ (not to exceed \$720 a year)

Cost Structure Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Fiscal Officer: \_\_\_\_\_  
(Signature and Office)

Supervisor: \_\_\_\_\_  
(Signature and Title)

Date: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**PRIVACY ACT STATEMENT**

Information on this form is protected by the Privacy Act. Disclosure may be made only to authorized persons according to Title 5 U.S.C. 552a(b).

\*FWS Form 3-2346 must be attached