

RURAL HOUSING GUARANTEE REPORT OF LOSS

INSTRUCTIONS — TYPE IN CAPITALIZED TYPE IN SPACES MARKED ()

Items 1 through 22 are to be completed by the Lender.

1. Report Type Code <input type="text"/> <p style="margin-left: 20px;">2 = Final Loss 4 = Recovery B = Adjustment to Loss</p>	2. Date of Claim <input type="text"/> - <input type="text"/> - <input type="text"/>
3. Case No. <input type="text"/>	4. Borrower Name <input type="text"/>
6. Date of Settlement <input type="text"/> - <input type="text"/> - <input type="text"/>	5. Loan No. <input type="text"/>
7. Lender ID No. <input type="text"/>	8. Branch No. <input type="text"/>
	9. Lender Name <input type="text"/>

GUARANTEED LOAN ITEMS:

10. Principal Balance Owed on Debt \$ <input type="text"/>	11. Accrued Interest Owed* \$ <input type="text"/>
12. Principal Balance Owed on Protective Advance* \$ <input type="text"/>	13. Accrued Interest on Protective Advance* \$ <input type="text"/>
14. Total (Items 10 thru 13) \$ <input type="text"/>	

*The Lender should attach documentation of these items per FMI.

Section A RECOVERY FROM COLLATERAL SOLD

Completed by Lender if collateral was sold to a third party.

15. Amount Property Sold for \$

16. Lender's Liquidation Costs \$

17. Net Proceeds from Collateral \$

Section B RECOVERY FROM OTHER ITEMS

Completed by Lender for recovery from other sources.

18. Funds in escrow account(s) \$

19. Other Recovery \$

20. Cost of Collection \$

21. Net Recovery (Items 18 and 19 less Item 20) \$

Section C Completed by Lender if property was acquired at foreclosure or by deed-in-lieu of foreclosure.

22. Lender's Liquidation Costs \$

Section D VALUE OF COLLATERAL ACQUIRED Completed by Rural Housing Service (RHS) if lender acquired property at foreclosure or by deed-in-lieu of foreclosure. This section should not be completed if Section A above has been completed.

23. Appraised Value \$ <input type="text"/>	25. Appraised Value Factor (Item 23 x Item 24) \$ <input type="text"/>
24. Acquisition Management, Resale Factor % <input type="text"/>	26. Net Proceeds from Collateral (Item 23 less Items 22 and 25) \$ <input type="text"/>

Section E LOSS GUARANTEE:

27. Lesser of Original Note Amount or Principal Actually Advanced \$

28. Maximum Loss Payable (90% of Item 27) \$

29. Authorized Lender Signature _____ Title _____ Date _____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0078. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

