

CCC-279
(08-25-03)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

(See Page 2 for Privacy Act and
Public Burden Statements.)

PROMISSORY NOTE

1. \$ _____ 3. State of _____
2. Date _____ 4. County of _____

FOR VALUE RECEIVED, I _____, promise to pay
(5) (Name)
the Commodity Credit Corporation (CCC) the sum of (6) _____
_____ and (7) _____ /100 Dollars (8) (\$ _____) with interest
thereon, beginning (9) _____, at a rate of (10) _____ percent per annum until paid, at (11) _____,
_____ ,
in (12) _____ installments of, at least, the sum of (13) \$ _____ each; the first of said installments being
due and payable on the (14) _____ day of (15) _____, (16) 20____, and one of said installments being due
payable every (17) _____ thereafter, until the full amount of the principal of this note, and the interest thereon,
has been fully paid and discharged. The said installments, when so paid, shall be first applied to the payment of the interest then
due on the principal of this note and the balance shall be applied to the payment of said principal.

(The amount of the installment may be collected by administrative offset when the installment becomes due.)

If default be made in the payment of any installment under this note, and if such default is not made good within thirty (30)
days of said installment due date, then, and at the option of CCC: 1) the entire principal sum and accrued interest shall at once
become due and payable without notice. Failure to exercise this option shall not constitute a waiver of the right to exercise the
same in the event of any subsequent default; 2) the principal amount and accrued interest in default at any time and at any times
during the term of this note shall, at the option of CCC, be collectible without notice by administrative offset from payments
due or to become due me.

"Additionally, interest at the rate of (18) _____ percent (19) (_____ %) per annum shall accrue and accumulate
upon any and all overdue payment amounts, arrearage cure payments, and all other arrearage that become due and outstanding. If
such arrearage do occur, interest shall be applied to such arrearage in this way: the arrearages amount including unpaid delinquent
interest, would be capitalized, and this total amount would thereafter accrue interest at the prevailing late interest rate and than
applied to any additional interest amounts that have accrued and is due and owing upon any and all overdue payments amounts
and arrearage." Failure to exercise this option shall not constitute a waiver of the right to exercise the same in the event of any
subsequent default.

I do hereby waive notice maturity, presentment, demand, protest, and notice of protest of this note.

This note is secured by collateral described as follows: (20)

Witness the following signature(s) and seal(s): _____ (SEAL) _____
(21A) Principal (21B) Date
_____ (SEAL) _____
(21A) Principal (21B) Date

22. ADMINISTRATIVE NOTATIONS

A. Reviewed: _____ C. Claim No. _____ Claim No. _____
County Executive Director No. _____ No. _____
B. Lien recorded at: _____ No. _____ No. _____

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NOTE: *The following statements are made in accordance with the Privacy Act of 1974 (5 USC552A), and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Federal Claims Collection Act, as amended by the Debt Collection Act of 1982, and the regulations at 7 CFR Part 792. Providing this information is voluntary, however, without it, installment payments to satisfy a debt will not be authorized. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 651, 1001, 15 USC 714m; and 31 USC 3729, may be applicable to the information provided by the respondent in this agreement.*

*According to the Paperwork Reduction Act of 1995 an agency may not conduct or sponsor, and a person is not 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 0560-0146. The time required to complete this information collection is estimated to average 15 minutes 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. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.***