This form is available electronically.		Form Approved – OMB No. 09 See Page 2 for Privacy Act and Public Burden Stat	
FSA-2341 (12-31-07)	U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency	Pi	osition
	CERTIFICATION OF ATTOR	NEY	
PART A - ADDRESS			
Attorney Name and Address		2. FSA Office	
'	'		
PART B - REQUEST			
1. You have been selected by <i>(a)</i>			
to prepare a title opinion/title insurance	, and handle the loan closing in connec	tion with the loan application filed with t	he
Farm Service Agency (FSA) for proper	ty located at <i>(b)</i>		
If you desire to do this work, please cor	nplete Part C and return this form to th	e FSA office immediately. FSA assumes	s no
		Do not begin work on this case until you	are
notified by FSA that, based on the infor	mation presented, you have been appro	oved.	
2A. Name	2B. Title		
2C. Signature	2D. Date		
DART C. ATTORNEY CERTIFICATIO	N.		
	/IN		
1. I hereby certify that I:			
1. I hereby certify that I: (a) am a practicing attorney; (b) am a member in good standing			•
 I hereby certify that I: (a) am a practicing attorney; (b) am a member in good standing 	g of the bar of <i>(c)</i>	; on with loan closing and title clearance:	•
 I hereby certify that I: (a) am a practicing attorney; (b) am a member in good standing (d) have current knowledge of the 	g of the bar of <i>(c)</i> e requirements of State law in connection	on with loan closing and title clearance;	•,
 I hereby certify that I: (a) am a practicing attorney; (b) am a member in good standing (d) have current knowledge of the 	g of the bar of <i>(c)</i>	•	•,
 I hereby certify that I: (a) am a practicing attorney; (b) am a member in good standing (d) have current knowledge of the (e) and my spouse, children, or but I will provide title clearance through 	g of the bar of <i>(c)</i> e requirements of State law in connections associates do not have a financial	•	•,
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 I hereby certify that I: (a) am a practicing attorney; (b) am a member in good standing (d) have current knowledge of the (e) and my spouse, children, or but I will provide title clearance through (a) a title opinion. (b) a title insurance policy I am currently covered with Lawyer 	g of the bar of <i>(c)</i> requirements of State law in connectionsiness associates do not have a financial the use of: (either liability insurance and fidelity because of the content of the liability insurance and fidelity because of the liability insurance and the liability insurance and the liability insurance and the liability insurance and the liability insurance	oond or a closing protection letter are require amount of <i>(a)</i> \$ p	

4A. Signature 4B. Date The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable,

I, and all of my employees and associates having access to the funds involved in this loan, are currently covered by a

fidelity bond in the amount of at least (g) \$ for each individual.

Coverage expires on *(f)*

from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

approved				
2B. Signature	2C. Date			
Note: The following statements are made in accordance with the Privacy Act of 1974 (5 USC 552a): the Farm Service Agency (FSA) is authorized by the Consolidated Farm and Rural Development Act, as amended (7 USC 1921 et seq.), or other Acts, and the regulations promulgated				
thereunder, to solicit the information requested on its application forms. The information requested is necessary for FSA to determine				
eligibility for credit or other financial assistance, service your loan, and conduct statistical analyses. Supplied information may be furnished to				
other Department of Agriculture agencies, the Internal Revenue Service, the Department of Justice or other law enforcement agencies, the Department of Defense, the Department of Housing and Urban Development, the Department of Labor, the United States Postal Service, or				
other Federal, State, or local agencies as required or permitted by law. In addition, information may be referred to interested parties under the				
Freedom of Information Act, to financial consultants, advisors, lending institutions, packagers, agents, and private or commercial credit				
sources, to collection or servicing contractors, to credit reporting agencies, to private attorneys under contract with FSA or the Department of Justice, to business firms in the trade area that buy chattel or crops or sell them for commission, to Members of Congress or Congressional				
staff members, or to courts or adjudicative bodies. Disclosure of the information requested is voluntary. However, failure to disclose certain				
items of information requested, including Social Security Number or Federal Tax Identification Number, may result in a delay in the processing				
995, an agency may not conduct or sponsor, and a pers	son 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 056				
	ia completing and reviewing the			
	nce with the Privacy Act of 1974 (5 USC 552a): the Farrient Act, as amended (7 USC 1921 et seq.), or other Act on its application forms. The information requested is a service your loan, and conduct statistical analyses. Sunternal Revenue Service, the Department of Justice or using and Urban Development, the Department of Labored or permitted by law. In addition, information may be litants, advisors, lending institutions, packagers, agents, to credit reporting agencies, to private attorneys under or buy chattel or crops or sell them for commission, to Meries. Disclosure of the information requested is voluntary I Security Number or Federal Tax Identification Number 1995, an agency may not conduct or sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor, and a personal control of the information of the sponsor.			