EIB 12-02 MT CGF Disbursement Approval Request

Disbursement Request Submission Screenshots (CGF)

February 5, 2013

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I.   Summary

Ex-Im Bank has developed an electronic disbursement approval processing system for guaranteed lenders with Credit Guarantee Facilities. After a Credit Guarantee Facility (CGF) has been authorized by Ex-Im Bank and legal documentation has been completed, the Lender will obtain and review the required disbursement documents (e.g. invoices, bills of lading, Exporter's Certificates, etc.) and will disburse the proceeds of the loan for eligible goods and services. The Lender will access and complete an electronic questionnaire through ExIm Online inputting key data and requesting approval of the disbursement. Ex-Im Bank's action (approved or declined) will be posted on the Lender's history page.

Eligible costs in the following categories may be authorized by Ex-Im Bank and the electronic disbursement approval request will have variations depending on the type of cost selected:

- U.S. goods and services
- Local cost goods and services

CGFs denominated in a foreign currency may be authorized. Disbursements under these transactions have special foreign exchange conversion rules depending on whether the U.S. exporter receives payment in U.S. dollars or a foreign currency under the terms of its supply contract. There are slight variations in the request which reflect the foreign exchange conversion approach:

- ✓ Fixed (the U.S. Exporter is paid in foreign currency): The Lender is required to enter all financial data in foreign currency values and the System will convert the information to U.S. dollars based on a pre-approved fixed exchange rate associated to the transaction.
- ✓ Floating (the U.S. Exporter is paid in U.S. dollars): The Lender is required to enter the total amount of the request in both U.S. dollars and foreign currency values so that a conversion rate can be established with the remaining financial data entered only in U.S. dollars.

The remainder of this document will provide screenshots of the sample Disbursement Request Forms that can be submitted by a Lender through the Ex-Im Online System. These forms are only available in electronic format and therefore all Lenders are required to submit for approval "on-line." The on-line process helps to confirm that all necessary data is collected up-front by enforcing data validations upon submission as well as ensuring the integrity of the data, meaning what was entered by the Lender, is what is received by Ex-Im Bank. As mentioned earlier, the decision to approve or decline a disbursement request is recorded on the history page and, in addition, is communicated via email to the individual assigned as the contact person on the disbursement request form. Depending on certain attributes of the transaction, the System will dynamically display the appropriate request form (i.e., if the transaction is a foreign currency deal, if the transaction contains local cost, etc.). In addition, the System will automatically display certain fields that are "view-only." This is data that Ex-Im Bank is able to pre-populate based on transaction details stored in our transaction processing systems. These fields

are included in the Transaction Information Section.

Transaction Information:	
Transaction Number:	08087682XX0001
Agreement / Transaction / Program Type:	MTG / CGF / US Cost Guarantee
Operative Date:	01/09/2013
Amount Authorized / Undisbursed (USD):	90884.00 / 90884.00
Foreign Currency:	EUR
Amount Authorized / Undisbursed (FC):	67072.00 / 67072.00

The System will default the Contact Information fields based on the contact information submitted with the disbursement request and provide the option for the Lender to update this information. The contact person will receive all email correspondence distributed by the System in reference to the disbursement request submitted.

Contact Information:	
* Contact Person:	Mary Smith
* Telephone Number:	202-565-2200
* Email:	mary.smith@email.com

Lastly, the System will require at least one invoice entry to be included with a disbursement request as well as any required field will be designed with an asterisk (*). For transactions where the Exposure Fee was paid up front and not financed, the System will not require the Lender to input the Exposure Fee amount and Date Exposure Fee paid. This information is known by the System because it is data that is collected prior to disbursement and subsequently stored in Ex-Im Online.

Certifications:

✱ Is payment of the Facility Fee current?	○ Yes	○ No
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○ Yes	○ No
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○ Yes	○ No
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○ Yes	○ No
* Are any of the Goods used equipment?	○ Yes	○ No
If yes, has Ex-Im Bank's written approval been obtained?	○ Yes	○ No
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○ Yes	○ No
* Are the dates that Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○ Yes	○ No
* Have all Exporters or Local Cost Providers been approved by Ex-Im Bank?	○ Yes	○ No
* Has any Exporter provided a statement pursuant to its Exporter's Certificate describing Goods and/or Services listed on the U.S. Munitions List (part 121 of Title 22 of the Code of Federal Regulations)? If yes, identify the Exporter and attach the Exporter's statement or list the Goods/Services and the U.S. Dollar amount of each in the comment box below.	○ Yes	○ No

Please provide any additional comments you want to include with this request:

Attachments:

To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[_____] [Browse...] [Attach]

Exporter/Local Cost Provider Invoice(s):

Invoice(s) financed by this Disbursement must be added to the Disbursement Request. Please enter invoice information for each Exporter or Local Cost Provider below and use the **"Add Invoice"** button to associate the invoice(s) with the Request. Repeat this process for each Exporter's or Local Cost Provider's invoice(s).

[At least 1 invoice is required]

Exporter/Local Cost Provider:	--Select One-- ▼
NAICS Code:	[____]
Product Description:	[____]
Gross/total invoice amount paid:	USD [____]
Financed Amount (excluding Exposure Fee):	USD [____]
Number of invoices:	[____]
U.S. Content Percentage from the Exporter's Certificate:	[____] %

[Add Invoice]

No Invoice added.

To better understand what is being communicated in the following pages, see below for a list of acronyms and their corresponding definition:

- CGF – Credit Guarantee Facility

- FC – Foreign Currency
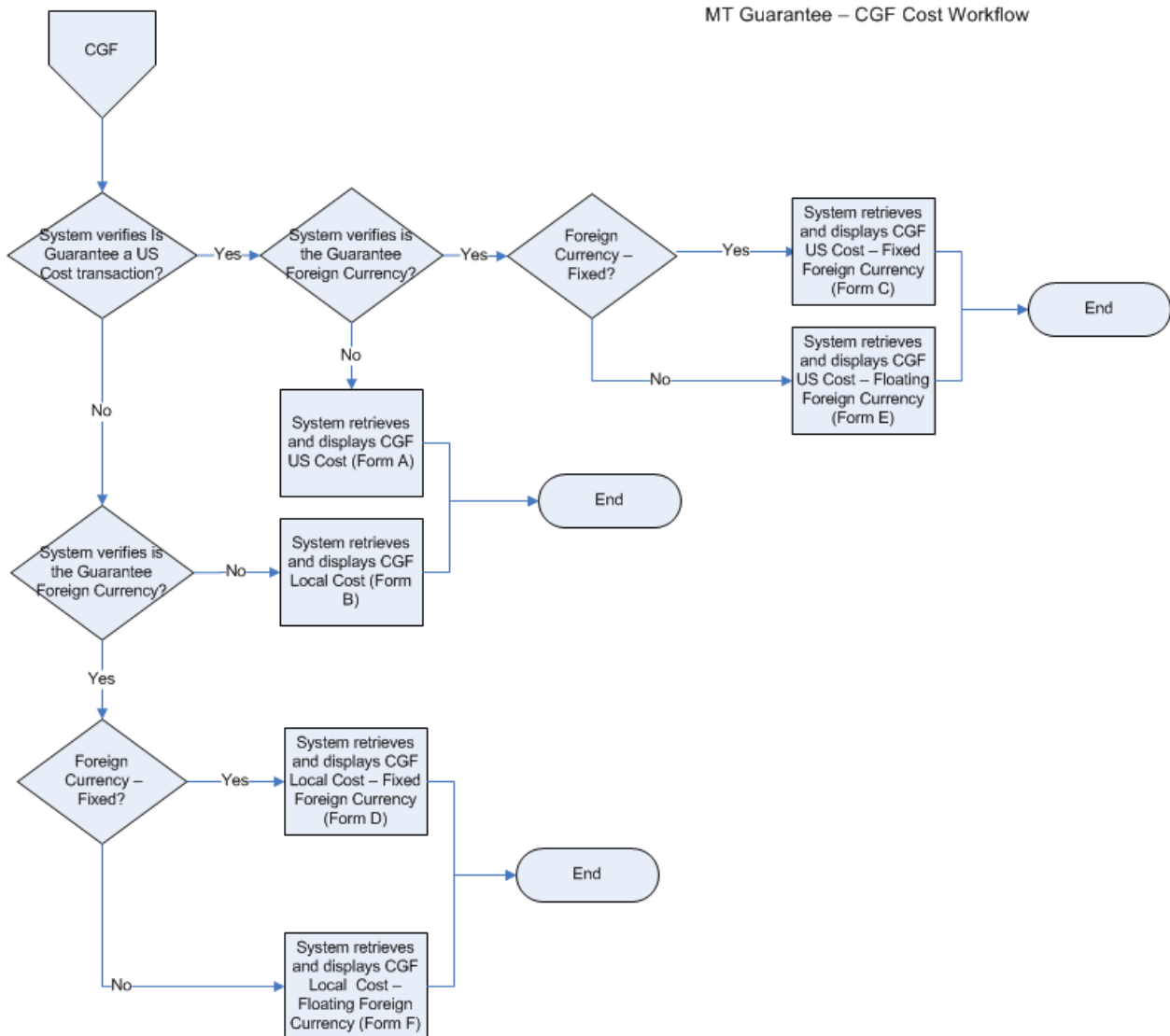- USD – US Dollar
- EOL – Ex-Im Online

The following section provides workflow diagrams, which define the process that will lead the System to determine which form should be presented to the Lender. In order to better illustrate the data collected for each form, a matrix has been included to show the data elements captured for each variation of the disbursement request form. In addition, Section I. includes sample screenshots of each request form with the appropriate reference to a particular workflow process (i.e.   A. Disbursement Request Form – CGF Guarantee (US Cost) corresponds to CGF Guarantee – US Cost Workflow "Form A reference" and "Form A" on the matrix).

II. Disbursement Request Forms - Workflow

A. Workflow processes

The workflow diagrams illustrate the System processes that occur when identifying which disbursement request form to display to the Lender. Section I. provides sample screenshots which correspond to an "end state" outlined through the workflow as well as a column in the data matrix outlining the specific elements displayed on a particular form (see section A.) .

CGF Workflow

MT Guarantee – CGF Cost Workflow

A. Data displayed with each disbursement request form

Data Element	A	B	C	D	E	F	Comment
TRANSACTION INFORMATION							
Transaction Number	X	X	X	X	X	X	System populated - view only
Agreements/Transaction/Program Type	X	X	X	X	X	X	System populated - view only
Operative Date	X	X	X	X	X	X	System populated - view only
Final Disbursement Date	X	X	X	X	X	X	System populated - view only
Initial Eligibility Date	X	X	X	X	X	X	System populated - view only
Authorized Amount/Undisbursed (USD)	X	X	X	X	X	X	System populated - view only
CONTACT INFORMATION							
Contact Person	X	X	X	X	X	X	Default to individual entering the request
Telephone Number	X	X	X	X	X	X	Default to individual entering the request
Email	X	X	X	X	X	X	Default to individual entering the request
DISBURSEMENT INFORMATION							
Total amount of this request (USD)	X	X			X	X	
Total amount of this request (FC (i.e. EUR))			X	X	X	X	
Amount of Exposure Fee related to this request (USD)	X	X	X	X	X	X	
Exposure Fee Rate related to this request	X	X	X	X	X	X	System populated - view only
Date of Disbursement related to this request	X	X	X	X	X	X	
Date Exposure Fee was paid to Ex-Im Bank under this request	X	X	X	X	X	X	
Repayment Term related to this request	X	X	X	X	X	X	Available values include: 2 years, 3 years, 4 years, 5 years, 7 years and Other (with text box)
CERTIFICATIONS							
Is payment of the Facility Fee current?	X	X	X	X	X	X	
Have all Conditions Precedent and Special Conditions to disbursement been met?	X	X	X	X	X	X	
Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	X	X	X	X	X	X	
Has the Disbursement been calculated in accordance with the Facility Agreement?	X	X	X	X	X	X	
Are any of the Goods used equipment?	X		X		X		
Are any of the Local Cost Goods used equipment?		X		X		X	
If yes, has Ex-Im Bank's written approval been obtained?	X	X	X	X	X	X	
Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written apropval has not been obtained?	X	X	X	X	X	X	
Are the dates that Goods and Services were shipped and/or provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	X		X		X		
Are the dates that Local Cost Goods and Services were shipped and/or provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?		X		X		X	
Have all Exporters been approved by Ex-Im Bank?	X		X		X		
Have all Local Cost Providers been approved by Ex-Im Bank?		X		X		X	
Has any Exporter provided a statement pursuant to its Exporter's Certificate describing Goods and/or Services listed on the U.S. Munitions List (part 121 of Title 22 of the Code of Federal Regulations)? If yes, identify the Exporter and attach the Exporter's statement or list the Good/Services and the U.S. Dollar amount of each in the comment box below?	X		X		X		
Additional Comments Box	X	X	X	X	X	X	
ATTACHMENTS							
Attachments Link	X	X	X	X	X	X	
EXPORTER/LOCAL COST PROVIDER INVOICE(S)							
Exporter/Local Cost Provider	X	X	X	X	X	X	Pre-populated based on approved list of exporter/local cost providers
NAICS Code	X	X	X	X	X	X	
Product Description	X	X	X	X	X	X	
Gross/total invoice amount paid (USD)	X	X			X	X	
Gross/total invoice amount paid (FC (i.e. EUR))			X	X			
Financed Amount (excluding Exposure Fee) (USD)	X	X			X	X	
Financed Amount (excluding Exposure Fee) (FC (i.e. EUR))			X	X			
Number of invoices	X	X	X	X	X	X	
U.S. Content Percentage from the Exporter's Certificate	X		X		X		

B. Accessing a Transaction

Once logged into ExIm Online, the System will present the Lender with a menu of options asking the Lender, "What do you want to do today?" On the left hand side, the Lender will select "Manage – Request a Disbursement Approval" (see below).

What would you like to do today ?

Act/Manage Transactions	View
Act	My Portfolio
Apply for Insurance Policy or Guarantee	Pending Applications
Act on Quote	Pending Claims
Apply for IBCL	Insurance In Force/Recently Expired Policies
Continue a Saved Application	Insurance Policy Assignments
Continue a Saved Claim	Authorized + Non-Operative Guarantees
	Operative Guarantees
Manage	
Amend a Policy or Guarantee	
Assign Insurance Policy Proceeds	Historical Transactions
Report Shipments	Maintain Broker
Make A Payment	My Company Profile
Report Overdues	
File a Claim	
Request a Disbursement Approval	

From this screen, the System will ask the Lender what action they want to take and the Lender will select to "Start a New Request".

Disbursement Request Actions

Note: Disbursement approval processing through Ex-Im Online is limited to guaranteed lenders who are required to submit their disbursement requests through Ex-Im Online.

Start a New Request

Continue a Saved Request

View Pending Requests

View Historical Requests

Upload Audit Documents

Once this option is selected, the System will display a listing of transactions associated to the Lender. Based on the transaction selected, the System will display the appropriate disbursement request screens which are included in Section I. of this document.

All Transactions

4 items found, displaying all items.
1

Items per page: 10 25 **50** 100

Transaction Number	Agreement Type	Transaction Type	Program Type	Operative Date	Amount Authorized (USD)	Amount Undisbursed (USD)	Foreign Currency	Amount Authorized (FC)	Amount Undisbursed (FC)
08087682XX0001	MTG	CGF	US Cost Guarantee	01/09/2013	90,884.00	90,884.00	EUR	67,072.00	67,072.00

I. Sample Disbursement Request Forms

A. Disbursement Request Form – CGF (US Cost)

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Assisting Export Financing
DEV Edition

Ex-Im Online Home

www.exim.gov

OMB No. XXXX, Expires --/--/----

Disbursement - Submit

To submit a Disbursement Request, please identify a contact, provide details on the requested Disbursement, complete the certifications, enter invoice information and click the **"Submit Request"** button. If you choose not to submit the request, press **"Save"** so information can be retrieved at a later point. The **"Back"** button returns you to the previous screen.

Fields marked with * are required.

Transaction Information:

Transaction Number:	08522315XX0001
Agreement / Transaction / Program Type:	MTG / CGF / US Cost Guarantee
Operative Date:	10/21/2012
Final Disbursement Date:	9/19/2015
Initial Eligibility Date:	9/19/2012
Amount Authorized / Undisbursed (USD):	8,786,960.00 / 8,769,389.10

Contact Information:

* Contact Person:	Mary Smith
* Telephone Number:	202-555-1212
* Email:	mary.smith@email.com

Disbursement Information

* Total amount of this request: USD [ ]
* Amount of Exposure Fee related to this request: USD [ ]
* Exposure Fee Rate related to this request: [ ] %
* Date of Disbursement related to this request: [ ] (mm/dd/yyyy)
* Date Exposure Fee was paid to Ex-Im Bank under this request: [ ] (mm/dd/yyyy)
* Repayment Term related to this request:
  - ○ 2 years
  - ○ 3 years
  - ○ 4 years
  - ○ 5 years
  - ○ 7 years
  - ○ Other [ ]

Certifications:

	Yes	No
* Is payment of the Facility Fee current?	○	○
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○	○
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○	○
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○	○
* Are any of the Goods used equipment?	○	○
If yes, has Ex-Im Bank's written approval been obtained?	○	○
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○	○
* Are the dates that Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○	○
* Have all Exporters been approved by Ex-Im Bank?	○	○
* Has any Exporter provided a statement pursuant to its Exporter's Certificate describing Goods and/or Services listed on the U.S. Munitions List (part 121 of Title 22 of the Code of Federal Regulations)? If yes, identify the Exporter and attach the Exporter's statement or list the Goods/Services and the U.S. Dollar amount of each in the comment box below.	○	○

Please provide any additional comments you want to include with this request:

[ ]

Attachments:
To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[ ] Browse... Attach

Exporter/Local Cost Provider Invoice(s):
Invoice(s) financed by this Disbursement must be added to the Disbursement Request. Please enter invoice information for each Exporter or Local Cost Provider below and use the **"Add Invoice"** button to associate the invoice(s) with the Request. Repeat this process for each Exporter's or Local Cost Provider's invoice(s).

Exporter/Local Cost Provider:	--Select One-- ▼
NAICS Code:	[ ]
Product Description:	[ ]
Gross/total invoice amount paid:	USD [ ]
Financed Amount (excluding Exposure Fee):	USD [ ]
Number of invoices:	[ ]
U.S. Content Percentage from the Exporter's Certificate:	[ ] %

Add Invoice

No Invoice added.

Back   Save   Submit Request

Paperwork Reduction Act:
We estimate it will take you about 1 hour per response, that includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to Ex-Im Bank and the Office of Management and Budget, Paperwork Reduction Project, OMB No. XXXX, Washington, D.C. 20503.

JOBS THROUGH EXPORTS

B.   Disbursement Request Form – CGF (Local Cost)

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Ex-Im Online Home

w w w . e x i m . g o v

OMB No. XXXX, Expires --/--/----

Disbursement - Submit

To submit a Disbursement Request, please identify a contact, provide details on the requested Disbursement, complete the certifications, enter invoice information and click the **"Submit Request"** button. If you choose not to submit the request, press **"Save"** so information can be retrieved at a later point. The **"Back"** button returns you to the previous screen.

Fields marked with * are required.

Transaction Information:

Transaction Number:	08522315XX0001
Agreement / Transaction / Program Type:	MTG / CGF / Local Cost
Operative Date:	10/21/2012
Final Disbursement Date:	9/19/2015
Initial Eligibility Date:	9/19/2012
Amount Authorized / Undisbursed (USD):	8,786,960.00 / 8,769,389.10

Contact Information:

* Contact Person:	Mary Smith
* Telephone Number:	202-555-1212
* Email:	mary.smith@email.com

Disbursement Information

* Total amount of this request:	USD
* Amount of Exposure Fee related to this request:	USD
* Exposure Fee Rate related to this request:	%
* Date of Disbursement related to this request:	(mm/dd/yyyy)
* Date Exposure Fee was paid to Ex-Im Bank under this request:	(mm/dd/yyyy)
* Repayment Term related to this request:	○ 2 years ○ 3 years ○ 4 years ○ 5 years ○ 7 years ○ Other

Certifications:

* Is payment of the Facility Fee current?	○ Yes	○ No
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○ Yes	○ No
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○ Yes	○ No
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○ Yes	○ No
* Are any of the Local Cost Goods used equipment?	○ Yes	○ No
If yes, has Ex-Im Bank's written approval been obtained?	○ Yes	○ No
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○ Yes	○ No
* Are the dates that Local Cost Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○ Yes	○ No
* Have all Local Cost Providers been approved by Ex-Im Bank?	○ Yes	○ No

Please provide any additional comments you want to include with this request:

Attachments:
To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[Browse...] [Attach]

Exporter/Local Cost Provider Invoice(s):
Invoice(s) financed by this Disbursement must be added to the Disbursement Request. Please enter invoice information for each Exporter or Local Cost Provider below and use the **"Add Invoice"** button to associate the invoice(s) with the Request. Repeat this process for each Exporter's or Local Cost Provider's invoice(s).

Exporter/Local Cost Provider:	--Select One--
NAICS Code:	
Product Description:	
Gross/total invoice amount paid:	USD
Financed Amount (excluding Exposure Fee):	USD
Number of invoices:	

[Add Invoice]

No Invoice added.

[Back]   [Save]   [Submit Request]

Paperwork Reduction Act:
We estimate it will take you about 1 hour per response, that includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to Ex-Im Bank and the Office of Management and Budget, Paperwork Reduction Project, OMB No. XXXX, Washington, D.C. 20503.

J O B S   T H R O U G H   E X P O R T S

C.   Disbursement Request Form – CGF (US Cost Foreign Currency - Fixed)

Logged in as: **super_user_sqt** | My Profile | Change Password | Help | Logout

Last logged on at 2:58 PM EST on Jan 31, 2013.

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Assisting Export Financing
DEV Edition

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OMB No. XXXX, Expires --/--/----

Disbursement - Submit

To submit a Disbursement Request, please identify a contact, provide details on the requested Disbursement, complete the certifications, enter invoice information and click the **"Submit Request"** button. If you choose not to submit the request, press **"Save"** so information can be retrieved at a later point. The **"Back"** button returns you to the previous screen.

Fields marked with * are required.

Transaction Information:

Transaction Number:	08522315XX0001
Agreement / Transaction / Program Type:	MTG / CGF / US Cost Guarantee
Operative Date:	10/21/2012
Final Disbursement Date:	9/19/2015
Initial Eligibility Date:	9/19/2012
Amount Authorized / Undisbursed (USD):	8,786,960.00 / 8,769,389.10
Foreign Currency:	EUR
Amount Authorized / Undisbursed (FC):	6,388,120.00 / 6,379,334.55

Contact Information:
* Contact Person: [Mary Smith]
* Telephone Number: [202-555-1212]
* Email: [mary.smith@email.com]

Disbursement Information
* Total amount of this request: EUR [   ] / USD
* Amount of Exposure Fee related to this request: USD [   ]
* Exposure Fee Rate related to this request: [   ] %
* Date of Disbursement related to this request: [   ] (mm/dd/yyyy)
* Date Exposure Fee was paid to Ex-Im Bank under this request: [   ] (mm/dd/yyyy)
* Repayment Term related to this request:
  - ○ 2 years
  - ○ 3 years
  - ○ 4 years
  - ○ 5 years
  - ○ 7 years
  - ○ Other [   ]

Certifications:

	Yes	No
* Is payment of the Facility Fee current?	○ Yes	○ No
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○ Yes	○ No
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○ Yes	○ No
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○ Yes	○ No
* Are any of the Goods used equipment?	○ Yes	○ No
If yes, has Ex-Im Bank's written approval been obtained?	○ Yes	○ No
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○ Yes	○ No
* Are the dates that Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○ Yes	○ No
* Have all Exporters been approved by Ex-Im Bank?	○ Yes	○ No
* Has any Exporter provided a statement pursuant to its Exporter's Certificate describing Goods and/or Services listed on the U.S. Munitions List (part 121 of Title 22 of the Code of Federal Regulations)? If yes, identify the Exporter and attach the Exporter's statement or list the Goods/Services and the U.S. Dollar amount of each in the comment box below.	○ Yes	○ No

Please provide any additional comments you want to include with this request: [   ]

Attachments:
To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[   ] [Browse...] [Attach]

Exporter/Local Cost Provider Invoice(s):
Invoice(s) financed by this Disbursement must be added to the Disbursement Request. Please enter invoice information for each Exporter or Local Cost Provider below and use the **"Add Invoice"** button to associate the invoice(s) with the Request. Repeat this process for each Exporter's or Local Cost Provider's invoice(s):

Exporter/Local Cost Provider:	--Select One-- ▼
NAICS Code:	[ ]
Product Description:	[ ]
Gross/total invoice amount paid:	EUR [ ] / USD
Financed Amount (excluding Exposure Fee):	EUR [ ] / USD
Number of invoices:	[ ]
U.S. Content Percentage from the Exporter's Certificate:	[ ] %

[Add Invoice]

No Invoice added.

[Back]   [Save]   [Submit Request]

Paperwork Reduction Act:
We estimate it will take you about 1 hour per response, that includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to Ex-Im Bank and the Office of Management and Budget, Paperwork Reduction Project, OMB No. XXXX, Washington, D.C. 20503.

D. Disbursement Request Form – CGF (Local Cost Foreign Currency – Fixed)

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Assisting Export Financing
DEV Edition

Ex-Im Online Home

www.exim.gov

OMB No. XXXX, Expires --/--/----

Disbursement - Submit

To submit a Disbursement Request, please identify a contact, provide details on the requested Disbursement, complete the certifications, enter invoice information and click the **"Submit Request"** button. If you choose not to submit the request, press **"Save"** so information can be retrieved at a later point. The **"Back"** button returns you to the previous screen.

Fields marked with * are required.

Transaction Information:

Transaction Number:	08522315XX0001
Agreement / Transaction / Program Type:	MTG / CGF / Local Cost
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Amount Authorized / Undisbursed (USD):	8,786,960.00 / 8,769,389.10
Foreign Currency:	EUR
Amount Authorized / Undisbursed (FC):	6,388,120.00 / 6,379,334.55

Contact Information:

* Contact Person:	Mary Smith
* Telephone Number:	202-555-1212
* Email:	mary.smith@email.com

Disbursement Information

* Total amount of this request:	EUR [ ] / USD
* Amount of Exposure Fee related to this request:	USD [ ]
* Exposure Fee Rate related to this request:	[ ] %
* Date of Disbursement related to this request:	[ ] (mm/dd/yyyy)
* Date Exposure Fee was paid to Ex-Im Bank under this request:	[ ] (mm/dd/yyyy)
* Repayment Term related to this request:	○ 2 years ○ 3 years ○ 4 years ○ 5 years ○ 7 years ○ Other [ ]

Certifications:

* Is payment of the Facility Fee current?	○ Yes	○ No
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○ Yes	○ No
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○ Yes	○ No
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○ Yes	○ No
* Are any of the Local Cost Goods used equipment?	○ Yes	○ No
If yes, has Ex-Im Bank's written approval been obtained?	○ Yes	○ No
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○ Yes	○ No
* Are the dates that Local Cost Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○ Yes	○ No
* Have all Local Cost Providers been approved by Ex-Im Bank?	○ Yes	○ No

Please provide any additional comments you want to include with this request:

[   ]

Attachments:
To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[   ] Browse...   Attach

Exporter/Local Cost Provider Invoice(s):
Invoice(s) financed by this Disbursement must be added to the Disbursement Request. Please enter invoice information for each Exporter or Local Cost Provider below and use the **"Add Invoice"** button to associate the invoice(s) with the Request. Repeat this process for each Exporter's or Local Cost Provider's invoice(s).

Exporter/Local Cost Provider:	--Select One-- ▼
NAICS Code:	[ ]
Product Description:	[ ]
Gross/total invoice amount paid:	EUR [ ] / USD
Financed Amount (excluding Exposure Fee):	EUR [ ] / USD
Number of invoices:	[ ]

Add Invoice

No Invoice added.

Back   Save   Submit Request

Paperwork Reduction Act:
We estimate it will take you about 1 hour per response, that includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to Ex-Im Bank and the Office of Management and Budget, Paperwork Reduction Project, OMB No. XXXX, Washington, D.C. 20503.

JOBS THROUGH EXPORTS

E.   Disbursement Request Form – CGF (US Cost Foreign Currency – Floating)

Ex-Im *Online*
Assisting Export Financing
DEV Edition

Last logged on at 2:58 PM EST on Jan 31, 2013.

Ex-Im Online Home

www.exim.gov

OMB No. XXXX, Expires --/--/----

Disbursement - Submit

To submit a Disbursement Request, please identify a contact, provide details on the requested Disbursement, complete the certifications, enter invoice information and click the **"Submit Request"** button. If you choose not to submit the request, press **"Save"** so information can be retrieved at a later point. The **"Back"** button returns you to the previous screen.

Fields marked with * are required.

Transaction Information:

Transaction Number:	08522315XX0001
Agreement / Transaction / Program Type:	MTG / CGF / US Cost Guarantee
Operative Date:	10/21/2012
Final Disbursement Date:	9/19/2015
Initial Eligibility Date:	9/19/2012
Amount Authorized / Undisbursed (USD):	8,786,960.00 / 8,769,389.10
Foreign Currency:	EUR
Amount Authorized / Undisbursed (FC):	6,388,120.00 / 6,379,334.55

Contact Information:

* Contact Person: [Mary Smith]
* Telephone Number: [202-555-1212]
* Email: [mary.smith@email.com]

Disbursement Information

* Total amount of this request: EUR [   ] / USD [   ]
* Amount of Exposure Fee related to this request: USD [   ]
* Exposure Fee Rate related to this request: [   ] %
* Date of Disbursement related to this request: [   ] (mm/dd/yyyy)
* Date Exposure Fee was paid to Ex-Im Bank under this request: [   ] (mm/dd/yyyy)
* Repayment Term related to this request:
  - ○ 2 years
  - ○ 3 years
  - ○ 4 years
  - ○ 5 years
  - ○ 7 years
  - ○ Other [   ]

Certifications:

	Yes	No
* Is payment of the Facility Fee current?	○	○
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○	○
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○	○
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○	○
* Are any of the Goods used equipment?	○	○
If yes, has Ex-Im Bank's written approval been obtained?	○	○
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○	○
* Are the dates that Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○	○
* Have all Exporters been approved by Ex-Im Bank?	○	○
* Has any Exporter provided a statement pursuant to its Exporter's Certificate describing Goods and/or Services listed on the U.S. Munitions List (part 121 of Title 22 of the Code of Federal Regulations)? If yes, identify the Exporter and attach the Exporter's statement or list the Goods/Services and the U.S. Dollar amount of each in the comment box below.	○	○

Please provide any additional comments you want to include with this request:
[   ]

Attachments:
To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[   ] [Browse...] [Attach]

Exporter/Local Cost Provider Invoice(s):
Invoice(s) financed by this Disbursement must be added to the Disbursement Request. Please enter invoice information for each Exporter or Local Cost Provider below and use the **"Add Invoice"** button to associate the invoice(s) with the Request. Repeat this process for each Exporter's or Local Cost Provider's invoice(s).

Exporter/Local Cost Provider:	[--Select One-- ▼]
NAICS Code:	[ ]
Product Description:	[ ]
Gross/total invoice amount paid:	USD [ ] / EUR
Financed Amount (excluding Exposure Fee):	USD [ ] / EUR
Number of invoices:	[ ]
U.S. Content Percentage from the Exporter's Certificate:	[ ] %

[Add Invoice]

No Invoice added.

[Back]   [Save]   [Submit Request]

Paperwork Reduction Act:
We estimate it will take you about 1 hour per response, that includes the time it will take to read the instructions, gather the necessary facts and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to Ex-Im Bank and the Office of Management and Budget, Paperwork Reduction Project, OMB No. XXXX, Washington, D.C. 20503.

JOBS THROUGH EXPORTS

F. Disbursement Request Form – CGF (Local Cost Foreign Currency - Floating)

Ex-Im *Online*
Assisting Export Financing
DEV Edition

Ex-Im Online Home

OMB No. XXXX, Expires --/--/----

Disbursement - Submit

To submit a Disbursement Request, please identify a contact, provide details on the requested Disbursement, complete the certifications, enter invoice information and click the **"Submit Request"** button. If you choose not to submit the request, press **"Save"** so information can be retrieved at a later point. The **"Back"** button returns you to the previous screen.

Fields marked with * are required.

Transaction Information:
Transaction Number:	08522315XX0001
Agreement / Transaction / Program Type:	MTG / CGF / Local Cost
Operative Date:	10/21/2012
Final Disbursement Date:	9/19/2015
Initial Eligibility Date:	9/19/2012
Amount Authorized / Undisbursed (USD):	8,786,960.00 / 8,769,389.10
Foreign Currency:	EUR
Amount Authorized / Undisbursed (FC):	6,388,120.00 / 6,379,334.55

Contact Information:
* Contact Person: Mary Smith
* Telephone Number: 202-555-1212
* Email: mary.smith@email.com

Disbursement Information
* Total amount of this request: EUR [ ] / USD [ ]
* Amount of Exposure Fee related to this request: USD [ ]
* Exposure Fee Rate related to this request: [ ] %
* Date of Disbursement related to this request: [ ] (mm/dd/yyyy)
* Date Exposure Fee was paid to Ex-Im Bank under this request: [ ] (mm/dd/yyyy)
* Repayment Term related to this request:
  - ○ 2 years
  - ○ 3 years
  - ○ 4 years
  - ○ 5 years
  - ○ 7 years
  - ○ Other [ ]

Certifications:

* Is payment of the Facility Fee current?	○ Yes	○ No
* Have all Conditions Precedent and Special Conditions to disbursement been met?	○ Yes	○ No
* Have all Disbursement Documents been received and are they all in compliance with the Facility Agreement?	○ Yes	○ No
* Has the Disbursement been calculated in accordance with the Facility Agreement?	○ Yes	○ No
* Are any of the Local Cost Goods used equipment?	○ Yes	○ No
If yes, has Ex-Im Bank's written approval been obtained?	○ Yes	○ No
* Does the Disbursement include any items on the list of Excluded Goods and Services for which Ex-Im Bank's written approval has not been obtained?	○ Yes	○ No
* Are the dates that Local Cost Goods were shipped and/or Services provided earlier than 180 days prior to the Disbursement Date in accordance with the Facility Agreement (unless Ex-Im Bank has provided written approval)?	○ Yes	○ No
* Have all Local Cost Providers been approved by Ex-Im Bank?	○ Yes	○ No

Please provide any additional comments you want to include with this request:

[text area]

Attachments:
To attach a document with the Disbursement request, please select a local file using the **"Browse"** button and click **"Attach"**.

[ ] Browse...   Attach

Exporter/Local Cost Provider Invoice(s):
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Exporter/Local Cost Provider:	--Select One-- ▼
NAICS Code:	[ ]
Product Description:	[ ]
Gross/total invoice amount paid:	USD [ ] / EUR
Financed Amount (excluding Exposure Fee):	USD [ ] / EUR
Number of invoices:	[ ]

Add Invoice

No Invoice added.

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Paperwork Reduction Act:
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