FORM APPROVED OMB NO. 0575-0137

Form RD 1980-19 (Rev XX-XX)   GUARANTEED LOAN CLOSING REPORT TRANSACTION CODE 4030					
1. CASE NUMBER			4. LENDER ID NO.	5. LENDER6. LENDERSTATUSTYPECODECODE	
ST CO BORROWER'S ID			7. CERTIFICATION EFFECTIV MO DA YR DATE	VE 8. CERTIFICATION EXPIRATION MO DA YR DATE	
2. BORROWER NAME AND ADDRESS (INCLUDING ZIP CODE)		)	9. LENDER NAME AND ADDRESS (INCLUDING ZIP CODE)		
3. BORROWER TYPE CODE			10. SERVICING OFFICE		
11. SOURCE OF FUNDS	12. INTEREST ASSISTANCE CODE		13. GUARANTEE FEE PURPOSE CODE	14. FEE RATE %	
15. AMOUNT OF GUARANTEE FEE PAID	16. AMOUNT OF LOAN- LINE OF CREDIT			18. CLOSING DATE MO DA YR	
19. MATURITY DATE OF LOAN MO DA YR	20. TERM OF BUYDOWN/ INTEREST ASSISTAN YEARS		21. PERCENT OF LOAN GUARANTEED .0000 %	22. LENDER'S NOTE INTEREST RATE ON GUARANTEED PORTION %	
23. LENDER'S NOTE INTERES' RATE ON NONGUARANTE PORTION %	24. BUYDOWN/INTEREST ASSISTANCE RATE %		25. PERIOD OF OPERATING LINE OF CREDIT YEARS	26. LOAN CLASSIFICATION CODE	
27. TYPE OF GUARANTEE 1-LINE OF CREDIT 2-LOAN NOTE GUARANTE	28. INTEREST BASIS (360 OR 365 DAYS) 3 6		29. INTEREST RATE CODE 1 - SINGLE VARIABLE 2 - SINGLE FIXED 3 - MULTI VARIABLE 4 - MULTI FIXED	30. BALANCE OWED ON LOAN	
31. DATE GUARANTEE PERIOD BEGINS MO DA YR	32. DATE GUARANTEE PERIOD ENDS MO DA YR		33. ANNUAL REVIEW DATE MO DA YR	34. CERTIFIED LOAN N-NO Y-YES	
35. AUTHORIZED LENDER'S SIGNATURE - I certify that all conditions of the conditional commitment have been met and that this report accurately describes the subject loan.			36. TITLE	37. DATE	
COMPLETED BY AGENCY SERVICING OFF				COMPLETED BY FINANCE OFFICE	
38. GUARANTEED 39. OBLIGATED 40. BRA   LOAN NUMBER LOAN NUMBER 40. BRA			ANCH NUMBER	41. DATE OF DEPOSIT MO DA YR	
42. SIGNATURE OF AGENCY REPRESENTATIVE - 43. I have reviewed this report and the information is consistent with the conditional commitment and the supporting documentation provided by the lender.			LE	44. DATE	

AGENCY SERVICING OFFICE (ORIGINAL) - FILE POSITION 2

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LENDER

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 of 575-0137. 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.