USDA Form RD 1940-1 (Rev. 06-10)

REQUEST FOR OBLIGATION OF FUNDS

FORM APPROVED OMB No. 0570-0061 OMB No. 0570-0062

INSTRUCTIONS-TYPE IN CAPITALIZED ELITE TYPE IN SPACES MARKED ()										
Complete Items 1 through 29 and applicable Items 30 through 34. See FMI.										
1. CASE NUMBER			LOAN NUMBER				FISCAL YEAR			
ST CO BORROWER ID										
2. BORROWER NAME				3. NUMBER NAME FIELDS						
				(1, 2, or 3 from Item 2)						
				4. STATE NAME						
					5. COUNTY NAME					
GENERAL BORROWER/LOAN INFORMATION										
6. RACE/ETHNIC 7. TYPE OF APPLICANT				8. COLLATERAL CODE 9. EMPLOYEE						
CLASSIFICATION 1 - INDIVIDUAL 7 - NONPROFIT-SECULAR			1- REAL ESTATE 4-MACHINERY ONLY SECURED 5-LIVESTOCK ONLY							
1 - WHITE 4 - HISPANIC 3 - CORPORATION 9 - INDIAN TRIBE				D 2-REAL ESTATE 6 - CROPS ONLY 1 - EMPLOYEE 2 - MEMBER OF FAMILY						
3 - Al/AN 5 - ASSOC. OF FARMERS 11-OTHER				SSITY 3 - NOTE ONLY OR BONDS 3 - CLOSE RELATIVE 4 - ASSOC.						
10. SEX CODE 3- FAMILY UNIT 1- MALE 1- ORGAN. MALE OWNED 2- FEMALE OWNED 6- PUBLIC BODY 11- MARIED 3- UMMARRIED (INCLUDES 2- SEPARATED WIDOWED/DIVORCED) 12. VETERAN CODE 1- YES 2- NO 13. CREDIT REPORT 1- YES 2- NO 14. ORGAN. MALE OWNED 2- SEPARATED WIDOWED/DIVORCED)										
14. DIRECT PAYMENT 15. TYPE OF PAYMENT					16. FEE INSPECTION					
(See FMI) 1 - MONTHLY 3 - SEMI-ANNUALLY 2 - ANNUALLY 4 - QUARTERLY			1 -YES 2 - NO							
17. COMMUNITY SIZE 1 - 10 000 OR LESS (FOR SFH AND 2 - OVER 10,000 HPG ONLY)			18. USE OF FUNDS CODE (See FMI)							
COMPLETE FOR OBLIGATION OF FUNDS										
19. TYPE OF 20. PURPOSE CODE				21. SOURCE OF FUNDS 22. TYPE OF ACTION						
ASSISTANCE (See FMI)		1					l	1 -OBLIGATION ONLY 2 - OBLIGATION/CHECK REQUEST 3 - CORRECTION OF OBLIGATION		
23. TYPE OF SUBMISSION 24. AMOUNT OF LOAN			25. AMOUNT OF GRANT							
1 - INITIAL 2 -SUBSEQUENT										
26. AMOUNT OF IMMEDIATE ADVANCE		27. DATE OF APPROVAL		28. INTEREST RATE		29. REPAYMENT TERMS				
		MO DAY YR								
				%						
COMPLETE FOR COMMUNITY PROGRAM AND CERTAIN MULTIPLE-FAMILY HOUSING LOANS 30. PROFIT TYPE										
2 - LIMITED PROFIT 1 - FULL PROFIT 3 - NONPROFIT										
COMPLETE FOR EM LOANS ONLY				COMPLETE FOR CREDIT SALE-ASSUMPTION						
31. DISASTER DESIGNATION NUMBER				32. TYPE OF SALE 2 - ASSUMPTION ONLY 4 - ASSUMPTION WITH						
(See FMI)				1 -CREDIT SALE ONLY 3 -CREDIT SALE WITH SUBSEQUENT LOAN SUBSEQUENT LOAN						
FINANCE OFFICE USE ONLY 33. OBLIGATION DATE				COMPLETE FOR FP LOANS ONLY						
MO DA YR				34. BEGINNING FARMER/RANCHER						
5/1 TK				(See FMI)						

If the decision contained above in this form results in denial, reduction or cancellation of USDA assistance, you may appeal this decision and have a hearing or you may request a review in lieu of a hearing. Please use the form we have included for this purpose.

Position 2

ORIGINAL - Borrower's Case Folder COPY 1 - Finance Office COPY 2 - Applicant/Lender **COPY 3 - State Office**

CERTIFICATION APPROVAL

For All Farmers Programs

EM, OL, FO, and SW Loans

This loan is approved subject to the availability of funds. If this loan does not close for any reason within 90 days from the date of approval on this document, the approval official will request updated eligibility information. The undersigned loan applicant agrees that the approval official will have 14 working days to review any updated information prior to submitting this document for obligation of funds. If there have been significant changes that may affect eligibility, a decision as to eligibility and feasibility will be made within 30 days from the time the applicant provides the necessary information.

If this is a loan approval for which a lien and/or title search is necessary, the undersigned applicant agrees that the 15-working-day loan closing requirement may be exceeded for the purposes of the applicant's legal representative completing title work and completing loan closing.

- 35. COMMENTS AND REQUIREMENTS OF CERTIFYING OFFICIAL
- 36. I HEREBY CERTIFY that I am unable to obtain sufficient credit elsewhere to finance my actual needs at reasonable rates and terms, taking into consideration prevailing private and cooperative rates and terms in or near my community for loans for similar purposes and periods of time. I agree to use the sum specified herein, subject to and in accordance with regulations applicable to the type of assistance indicated above, and request payment of such sum. I agree to report to USDA any material adverse changes, financial or otherwise, that occur prior to loan closing. I certify that no part of the sum specified herein has been received. I have reviewed the loan approval requirements and comments associated with this loan request and agree to comply with these provisions.

(For FP loans at eligible terms only) If this loan is approved, I elect the interest rate to be charged on my loan to be the lower of the interest rate in effect at the time of loan approval or loan closing. If I check "NO", the interest rate charged on my loan will be the rate specified in Item 28 of this form.

YES ______NO **WARNING:** Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under this title or imprisoned not more than five years, or both." ______, 20 ____ (Signature of Applicant) ______ . 20 ____ (Signature of Co-Applicant) I HEREBY CERTIFY that all of the committee and administrative determinations and certifications required by regulations prerequisite to providing assistance of the type indicated above have been made and that evidence thereof is in the docket, and that all requirements of pertinent regulations have been complied with. I hereby approve the above-described assistance in the amount set forth above, and by this document, subject to the availability of funds, the Government agrees to advance such amount to the applicant for the purpose of and subject to the availability prescribed by regulations applicable to this type of assistance. (Signature of Approving Official) Typed or Printed Name: Date Approved: TO THE APPLICANT: As of this date _____, this is notice that your application for financial assistance

from the USDA has been approved, as indicated above, subject to the availability of funds and other conditions required by

the USDA. If you have any questions contact the appropriate USDA Servicing Office.