FORM APPROVED

			OMB NO. 05/2-0155
Form RD 5001-9 GUARANTEED LOAN CLOSING REPORT			
(00-00) 1. CASE NUMBER		3. LENDER ID NO.	4. BRANCH
			NUMBER
ST CO BORROWER'S ID			
2. BORROWER NAME		5. LENDER NAME AND ADDRESS	
6. SERVICING OFFICE		7. AMOUNT OF GUARANTEE FEE PAID	
8. AMOUNT OF LOAN		9. AMOUNT ADVANCED AT CLOSIN	IG 10. CLOSING DATE (MO/DA/YR)
	12. PERCENT OF LOAN	12 LENDENG NOTE DITEREGT	14 LEMBER G MOTE BUTER FOR
11. MATURITY DATE OF LOAN (MO/DA/YR)	GUARANTEED	13. LENDER'S NOTE INTEREST RATE ON GUARANTEED	14. LENDER'S NOTE INTEREST RATE ON
	.0 0 0 0 %	PORTION %	NONGUARANTEED PORTION
		70	
	16 111 21 21 21 21 21 21		
15. INTEREST BASIS (ACTUAL 360, 360 Days, and 365 Days) 16. VARIABLE/FIXED 1-SINGLE VARIABLE		17. Variable: Source of Base Rate Publication :	
	2-SINGLE FIXED 3-MULTI VARIABLE	Difference Rate Change Period: Rate Cap: Rate Floor:	
	4- MULTI FIXED	Unguaranteed Rate: Current	Base Rate +Incremental od: Rate Cap: Rate Floor:
18. AUTHORIZED LENDER'S SIGNATURE - I certify that all conditions of the Conditional Commitment have been		19. TITLE	20. DATE
met and that this report accurately describes the subject loan.			
COMPLETED BY AGENCY SERVICING OFFICE			
21. OBLIGATED LOAN NUMBER			
22. SIGNATURE OF AGENCY REPRESENTATIVE - I have reviewed this report and the information is consistent		23 TITLE	24 DATE
with the Conditional Commitment and the supporting documentation provided by the lender.			
documentation provided by the lender.			

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 currently valid OMB control number. The valid OMB control number for this collection is 0572-0155. 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. Responses to this collection of information are mandatory (7 CFR 5001). Send comments on the agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to InnovationCenterRegulations@usda.gov. Include the OMB control number in any correspondence. Do not send the completed form to this address.