

◀..... IF REQUESTING A CHECK, STAPLE INVOICE HERE

USDA FORM RD 2024-30 (08-05)	U.S. DEPARTMENT OF AGRICULTURE RURAL DEVELOPMENT NON-CONTRACTUAL PROGRAM LOAN COST EXPENSE (PLCE) CERTIFICATION	1. Foundation Financial Information System (FFIS) State Division Code
		2. Request Date (MM-DD-YYYY)

PART - A TYPE OF ACTION REQUESTED

3A. Initial PLCE Obligation (Check One) <input type="checkbox"/> Yes <input type="checkbox"/> No		3B. Initial Dollar Amount Requested \$
4A. Modification to Obligation Request (Check One) <input type="checkbox"/> Increase Obligation Request Amount <input type="checkbox"/> Other (Describe in Item 7A below) <input type="checkbox"/> Decrease Obligation Request Amount <input type="checkbox"/> Post Payment Modification <i>(Describe in Item 7A below)</i>		4B. Revised Dollar Amount <i>(Including any cancellations)</i> \$
5. Cancellation of Obligation (Check One) <input type="checkbox"/> Partial Cancellation <input type="checkbox"/> Full Cancellation		6. Date of Certification (Attach Invoice)
7A. Description of Services Requested	7B. Project Number (MFH expenses only)	
7C. Fund Code/Loan Number	7D. FFIS Program Code	
7E. Date of Original Loan	7F. PLCE Account (A, L, R) (Check One) <input type="checkbox"/> A <input type="checkbox"/> L <input type="checkbox"/> R	
8A. Name of Applicant/Borrower (Last Name, First Name & MI)		8B. Case Number or Property ID Number
9A. Name of Initiating Agency Official (Print)		9B. Signature of Initiating Agency Official
9C. Email Address of Initiating Agency Official		

PART B - PAYEE INFORMATION

10A. Payee's Name	10B. Payee's EIN/TIN/SSN
10C. FFIS Vendor Code	
10D. Payee's Address (Including Zip Code)	
10E. Payee's DUNS Number	
10F. Payee's Email Address	10G. Payee's Telephone Number (Including Area Code)

PART C - FOR STATE OFFICE USE ONLY

I IA. Signature of PLCE Funds Approving Official	11B. PLCE Funds Approval Date (MM-DD-YYYY)
12A. FFIS MY Document Number	12B. FFIS TY Document Number