	AYMENT TO	FANCE/INTEREST RATE GUARANTEED LOAN L section 4031	
1. CASE NO.	11,001	2. BORROWER NAME	
ST CO BORROWER'S ID			
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3. LENDER ID NO. 4. LENDER NA	AMF		5. BRANCH NO.
A LENDER IN	-		5. BRANCH NO.
			-
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6. LOAN NO.		7. ORIGINAL LOAN AMO	DUNT
		s	. . 1
8. BEGINNING CLAIM PERIOD.		9. END CLAIM PERIOD	
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10. PRINCIPAL BALANCE AT BEGINNING OF CLAIM PERIOD		11. ACCRUED INTEREST AT BEGINNING OF CLAIM PERIOR	
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a. t . t . l . t			1
12. AMOUNT OF PRINCIPAL ADVANCED DURING CLAIM PERIOD		13. INTEREST PAYMENTS DURING CLAIM PERIOD	
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14. PRINCIPAL PAYMENTS DURNING CLAIM PE	.HIOD	15. ACCRUED INTERES	TATEND OF CLAIM PERIOD
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16. PRINCIPAL BALANCE AT END OF CLAIM PE	RIOD	17. INTEREST PAYABLE	
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	CHECK ISSUED	CODE (Completed by the Agency) 20. DATE MANUAL CHECK ISSU
1 = YES 1 = SYSTE		M GENERATED CHECK (Completed by Finance Office	
2 = NO	2 = MANUA	L CHECK ECK ISSUED	MO DA YR
PEOUEST FOR COM			
TERM OF NEXT INTEREST ASSISTANCE	E PERIOD	DJUSTMENT OF INTERES 23. PERCENT OF ASSISTANCE	F RECHESTED NEXT DEDICO
21. BEGINNING DATE 22. ENDIN		L STOLITT OF PLOIDING	E-HEGGEOTED HEAT FERIOD
MO DA YR, MO D	DA YR		
24. TERMINATE INTEREST ASSISTANCE AGREE	MENT	25 55550775 255	1 00 007
1 = YES IFYES ALL ASISTANCE FUND	SFOR	25. EFFECTIVE DATE OF TERMINATION.	26. REASON FOR TERMINATION CODE
1=YES IFYES ALL ASISTANCE FUND 2=NO THE LIFE OF THE ASSISTANC DEOBLIGATED (NOF TURE)	E ARE PAYMENTS)	MO DA YR	
27. AUTHORIZED LENDER'S SIGNATURE		28. TITLE	29. DATE
I hereby certify that the above claim is accurate and con	istent with the		120.20.00
terms of Agency regulations and the Interest Assistance Interest Rate Buydown Agreement. The Request for Continua	ation/Adjustment		
was determined based on the borrower need in accordar regulations and the Interest Assistance Agreement.	nce with Agency		
•			
APPROVAL (AGENCY USE ONLY) 3 I have reviewed the above Request for Payment of I	0. Percent of Inter	est Assistance Approved for next p	period.
I have reviewed the above Request for Payment of I Interest Assistance. The requested payment and/or ap	Interest Assistance	e/interest Rate Buydown/Subsidy	and/or Request for Continuation/Adjus
regulations and the Interest Asistant Agreement/Interest	ast Rate Buydown	aan wood in room oo aassisiaan de is const Agreement.	war wan i nia aribboutud gochtuautstou
31. AUTHORIZED AGENCY OFFICIAL (SIGNATUR		32. TITLE	33. DATE
-1			
			1

Form is to be used by a lender to request periodic interest assistance, interest rate buydown, or subsidy payments.

(see reverse)

PROCEDURE FOR PREPARATION

: HB-1-3565.

PREPARED BY

: Lender.

NUMBER OF COPIES

: Original and one copy.

SIGNATURES REQUIRED

: Lender and the Agency representative.

DISTRIBUTION OF COPIES

: Original to the Agency servicing office and copy retained by lender.

ADPS RELATED TRANSACTION CODE

: GB, Subsidy Payment.

(07-07-99) PN 307

PAGE 2 OF FORM RD 1980-24

FUNCTION OF FORM

Completed by lender to request periodic interest rate buydown payments or interest assistance payments for Farmer Program Loans or subsidy payments for EM Actual Loss Loans. This form is also used to continue or adjust interest assistance on the account.

PROCEDURE REFERENCE

HB-1-3565

PREPARED BY

Lender in consultation with the Agency.

ADDITIONAL INFORMATION

If this form is being completed to establish a continuation of interest assistance after a year with zero percent interest assistance, items 1 through 16 should be completed as usual; item 17 will be 0.00; item 18 as usual; item 19 as 3 (no check issued); and items 21 through 35 as usual.

DISTRIBUTION

Item 16.

Original to Servicing Office and Copy retained by Lender.

INSTRUCTIONS FOR PREPARATION

Enter the Borrower's Case Number. Show the state and county code and the borrower's Social Security or Internal Revenue Service Tax Identification Number. Example: 1219.101317101918171.61514131218.

Enter Borrower's Name (Last Name First)—abbreviate when necessary. Example: |T|H|O|M|P|S|O|N||R|O|B|E|R|T|||L|||

Item 3. Enter the Lender's Internal Revenue Service Tax Identification Number. Example: 101716151413121415161

Item 4. Enter Lender's Name—abbreviate when necessary, Example: | FILIRISTT| INTALTITIOTNIATE | BIAINIK

Item 5. Enter the assigned branch number. Example: 10131

Item 6. Enter assigned loan number, Example: 10121

Enter the original loan amount. Example: |\$\frac{1}{2} \cdot Item 7.

Enter the beginning date of the current buydown, interest assistance or subsidy period. Example: The loan/buydown/interest assistance/subsidy closing date is 05-04-88; initial request beginning date is 05-04-88; subsequent requests will begin with the ending date submitted on the previous request for payment.

Item 9. Enter the ending date of the current buydown, interest assistance, or subsidy period. The ending date on this request equals the beginning date on the next request.

NOTE: Interest rate buydown and interest assistance claims may only be submitted for a 12 month period unless it is the first or last claim.

Subsidy payments on EM Actual Loss Loans may be submitted for a 6 or 12 month period only.

If the Contract of Guarantee or Loan Note Guarantee is or becomes void or unenforceable, or terminates, or a transfer and assumption occurs, the subsidy/buydown/interest assistance should be claimed up to that date. In the case of assumptions to eligible transferrest, the beginning date on the transferred loan is the assumption date; and the initial claim may be at anytime with future claims at 12-month intervals, except as described above.

Enter the principal balance of the loan at the beginning of the subsidy period. If this is the first claim on a new loan, this amount will make the amount advanced on Form RD 1980-19. Loan Closing Report, If this loan was a buydown or interest assistance on an existing loan, this amount will make the loan amount on Form RD 1980-19. For subsequent claims the principal balance must equal the ending principal balance on the previous claim. Item 10.

ALL INTEREST CALCULATIONS ON THIS FORM ARE BASED ON THE BORROWER'S EFFECTIVE INTEREST RATE.

Enter the borower's accrued interest at the beginning of the subsidy period. This accrued interest must equal the ending accrued interest shown on the previous claim.

Item 12. Enter the amount of principal disbursed during the current subsidy period. This amount does not include protective advances.

Item 13. Enter the total amount of interest payments received from the borrower during the current claim period. If zero, enter 0.00.

Enter the total amount of principal payments received from the borrower during the current claim period. If zero, enter 0.00. Item 14.

Item 15. Enter the accrued interest balance at the end of the current claim period. If zero, enter 0.00. (This amount isother, beginning accrued interest balance on the next claim.)

Enter the principal balance at the end of the current claim period. If Zero, enter 0.00 (This amount is the beginning principal balance on the next claim.)

Item 17. Enter the amount of interest rate buydown/interest assistance/subsidy payable.

BUYDOWN PAYMENT CALCULATION

(Item 13 + 15 - 11) X Buydown Rate Paid by the Agency Borrower's Effective Rate

EM ACTUAL LOSS SUBSIDY CALCULATION

(Item 13 + 15 - 11) X Loan Subsidy Rate Interest Rate on Note or Assumption Agreement

INTEREST ASSISTANCE PAYMENT CALCULATION

(Item 13 + 15 - 11) X Interest Assistance Rate
Borrower's Effective Rate

PAGE 3 OF FORM RD 1980-24

INSTRUCTIONS FOR PREPARATION (continued) Enter the applicable code to identify if this is the final payment. Item 19. Completed by Servicing Office or Finance Office. 1 = System Generated Check 2 = Manual Check (Finance Office Only) 3 = No Check Issued Item 20. Completed by Finance Office Only. The Finance Office will enter the check issue date for manual checks only (item 19 eduals 2). ITEMS 21 THROUGH 26 ARE COMPLETED ONLY IF THE BORROWER IS AN INTEREST ASSISTANCE BORROWER. Item 21. Enter the beginning date of the next interest assistance period. Enter the ending date of the next interest assistance period. Item 22. Item 23. Enter the percent of assistance requested for the next period. IF THIS PERCENT IS GREATER THAN THE PERCENT ON THE MASTER INTEREST ASSISTANCE AGREEMENT. FONDS MUST BE OBLIGATED PRIOR TO SIGNING THIS FORM. If the bottower will need zero percent next year, enter 00,000. Item 24. Enter the applicable code. 1 = Yes 2 = No IF CODE 1 (YES) IS ENTERED. THE ASSISTANCE FUNDS FOR THE REMAINING LIFE OF THE AGREEMENT ARE DEOBLIGATED; THEREFORE, THERE ARE NO FUTURE PAYMENTS. Enter the effective date of the interest assistance termination. Complete only if item 24 equals 1. Item 25. Enter the reason for termination code. Complete only if item 25 is complete. ltem 26. 01 — Borrower is no longer eligible for interest assistance. 02 — Loan is paid in full. THIS FORM WILL BE RETURNED IF IT IS NOT SIGNED. Enter the authorized lender's signature. Item 27. Item 28. Enter the title of the person authorized to sign this form. Item 29. Enter the date signed by the lender's representative. Enter the percent of interest assistance approved, TQ BE COMPLETED BY SERVICING OFFICE ONLY. This amount may not exceed the Maximum Rate of Interest Assistance which was obligated and is stated on the Interest Assistance Agreement. Item 30. Item 31. Enter the authorized Agency representative signature for approval. Enter the title of the authorized Agency representative. Item 32. Item 33. Enter the date signed by Agency representative.