

Form RD 4279-16 (Rev. 07-05) UNITED STATES DEPARTMENT OF AGRICULTURE RURAL DEVELOPMENT

QUARTERLY PROBLEM/DELINQUENT LOAN REPORT
(Business and Industry and Section 9006 Program)

Complete Part I and Part II
(If additional space is required for a response, please attach as an addendum.
(Insert NA, if not applicable.)

Part I

State: _____ Reporting Date: _____
 Borrower: _____ Lender: _____
 Case Number: _____ Loan Classification: _____

Type Loan Gtd Direct D&D Loan Status: Problem _____
 DARBE BID Delinquent _____
 EO Coop Liquidation _____
 Other (Identify) Chapter _____

Type of Business, Brief History, and Cause of Problem:

Financial Data:

Date of Guar.	Original % Amount	Guar.	Interest Rate	Principal Balance	Interest Balance	Delinq. Principal	Delinq. Interest	Daily Int. Accrual
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

1. Lender, servicing actions in last quarter and cooperation. _____

2. State Office action in last quarter and cooperation. _____

3. State Office and Lender's recommendation to eliminate problem/delinquency and summary.

This form is used by RBS field personnel to report problem loans to the National Office. All problem loans that are in excess of the State's loan servicing authority, all delinquent loans, and any loans in bankruptcy will be report on Form 4279-16.

(see reverse)

- PROCEDURE FOR PREPARATION : RD Instruction 4287-B.
- PREPARED BY : RBS.
- NUMBER OF COPIES : Original and one copy.
- SIGNATURES REQUIRED : Original by authorized RBS personnel.
- DISTRIBUTION COPIES : Original to National Office, copy to case file.

PAGE 2 OF FORM RD

Complete Part I and Part II
(Insert NA, if not applicable.)

Part II

State: _____ Reporting Date: _____

Borrower: _____

Collateral:	Appraisal Date	Lien Position	Market Value	Liquidation Value
R.E.	_____	_____	_____	_____
M&E	_____	_____	_____	_____
INV.	_____	_____	_____	_____
Other	_____	_____	_____	_____
Personal Guarantee (NAME)	#1 _____	#2 _____	#3 _____	#4 _____
Net Worth:	_____	_____	_____	_____
Secured/Unsecured	_____	_____	_____	_____
Amount Collected:	_____	_____	_____	_____

Liquidation	Date	Amount	Bankruptcy	Date
Meeting between lender and Agency	_____	_____	Bank Filed: Ch. ___	_____
Liquidation plan submitted:	_____	_____	Reorganization plan filed:	_____
Liquidation plan amended/modified	_____	_____	Reorganization plan approved: (Attach copy)	_____
Accrued Interest terminated:	_____	_____	Bankruptcy Converted: Ch. ___	_____
Liquidation plan approved: (Attach copy)	_____	_____	Bankruptcy dismissed:	_____
Estimated loss (entire loan):	_____	_____	Bankruptcy closed:	_____
Demand on lender for repurchase:	_____	_____		
Guaranteed portion repurchased by:				
Lender/Agency (circle one)	_____	_____		
Estimated loss paid:	_____	_____		
Final loss paid:	_____	_____		
OIG/GAO audit/investigation requested:	_____	_____		
OIG/GAO audit/investigation closed:	_____	_____		
OIG/GAO audit/investigation justification, status, and findings:	_____			

List other Federal agencies involved: _____

Comments:

DATE BUSINESS PROGRAMS DIRECTOR

DATE STATE DIRECTOR