

United States Department of Agriculture

Rural Development

September 8, 2016

State Office Community Programs and Program Support

4405 Bland Road, Suite 260 Raleigh NC, 27609 Voice 919.873.2030 Fax 919.873.2076 Matthew Woodard Montgomery County High School 102 East Spring Street Troy, NC 27371

Dear Mr. Woodard:

Enclosed is Form RD 1940-1, "Request for Obligation of Funds." This serves as notice that your application for financial assistance from Rural Development has been approved.

We are advised that the funds you requested are reserved in the amount shown in Item 24 at the interest rate indicated in Item 28.

If you have any questions concerning this reservation of funds, please contact the Rural Development Area Specialist at Asheboro, North Carolina.

Sincerely,

D. Garland Burnette

Director, Community Programs/Program Support

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

REQUEST FOR OBLIGATION OF FUNDS

FORM APPROVED OMB No. 0570-0062

(Nev. 00-10)										
		TYPE IN CAPITALIZE								
Complete Items 1 through 29 and app							FISCAL YEAR			
, once nomber				LOAN NUMBER			FISCAL TEAR			
ST CO BORROWER ID										
38-062-*****0321				3. NUMBER NAME FIELDS						
Z. DOMONEK MAIIE				(1, 2, or 3 from Item 2)						
MONTGOMERY COUNTY				4. STATE NAME						
				North Carolina						
				5. COUNTY NAME						
	<u> </u>	GENERAL BORRO		tgomery	RMATION					
6. RACE/ETHNIC 7. TYP	E OF AP	PLICANT	$\overline{}$	8. COLLATE		-T	9. EMPLOYEE			
CLASSIFICATION 1-IN	DIVIDUAL ARTNERSHIP	6 - ORG. OF FARMERS 7 - NONPROFIT-SECULAR	1- REAL ESTATE 4- MACHINERY ONLY SECURED 5- LIVESTOCK ONLY 1- EMOLOGYEE							
2 - BLACK 5 - A/PL 4 - PL	ORPORATION		2-REAL ESTATE 6-CROPS ONLY 2-MEMBER OF FAMILY AND CHATTEL 7-SECURED BY							
3-ABAN 4 FA	SSOC. OF RMERS	11-OTHER			OR BONDS LY 8-RLFACCT		13. CREDIT RE	:DORT		
10. SEX CODE	D 11	. MARITAL STATUS 1 - MARRIED 3 - UNMARRIED 2 - SEPARATED WIDOWED/8		IDES 1 1-YES			2 1-YES 2 2-NO	.i Oiti		
14. DIRECT PAYMENT	15. TYP	E OF PAYMENT	16. F	FEE INSPECT	TION					
3 (See FMI)	2 1 · MC	ONTHLY 3 - SEMI-ANNUALLY NUALLY 4 - QUARTERLY	2 2 1-YES 2 · NO							
17. COMMUNITY SIZE 1.10 000 ORLESS (FOR SFH AND 2. OVER 10,000 HPG ONLY)			18. USE OF FUNDS CODE (See FMI)							
2 OVER 10,000 THIS GIVELY	-	COMPLETE FOR	₹ ОВІ	LIGATION OF	FUNDS					
19. TYPE OF 20. PURPOSE CODE			21. SOURCE OF FUNDS 22. TYPE OF ACTION			l				
ASSISTANCE (See FMI)	1		1				1 -OBLIGATION ONLY 2 - OBLIGATION/CHECK R 3 - CORRECTION OF OBLI			
23. TYPE OF SUBMISSION 24. AMOUNT OF LOAN			25. AMOUNT OF GRANT							
1-INITIAL 2-SUBSEQUENT \$9,900,000.00										
26. AMOUNT OF 27. DATE OF APPROVAL			28. INTEREST RATE 29. REPAYMENT TERMS			RMS				
	MO DAY YR	2.7500 %		7500 %	40	1				
COMPLETE FOR COMMUNITY RECCEASE			A AND CERTAIN MULTIPLE-FAMILY HOUSING LOANS							
30 PROFIT TYPE		Olimoti i i i i i i i i i i i i i i i i i i								
2 - LIMITED PROFIT 1 - FULL PROFIT 3 - NONPROFIT										
COMPLETE FOR EM LOANS ONLY				COMPLETE FOR CREDIT SALE-ASSUMPTION 32. TYPE OF SALE						
31. DISASTER DESIGNATION NUMBER (See FMI)				2 - ASSUMPTION ONLY 4 - ASSUMPTION WITH 1 - CREDIT SALE ONLY 3 - CREDIT SALE WITH SUBSEQUENT LOAN SUBSEQUENT LOAN						
FINANCE OFFICE USE ONLY				COMPLETE FOR FP LOANS ONLY						
33. OBLIGATION DATE			34. BEGINNING FARMER/RANCHER							
MO DA YR	·			(See FMI)	<u></u>					
I										

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

For All Farmers Programs

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.

COMMENTS AND REQUIREMENTS OF CERTIFYING OFFICIAL 35. SEE LETTER OF CONDITIONS DATED 08/25/2016

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.

	loan will be the rate	specified in Item 28 of this	torm.	YES	_ NO	
	WARNING:	knowingly and willfully fact, or makes any fals any false writing or do	falsifies, con e, fictitious or cument know	ceals or cove fraudulent st ing the same	rs up by any trick atements or repre to contain any fals	agency of the United States , scheme, or device a material esentations, or makes or uses se, fictitious or fraudulent more than five years, or both."
Date	8/25	, 20 <u>ll</u> e	X	temes	J. W/al	(Signature of Applicant)
Date		, 20	<i>U</i>			(orginital e ty repriority)
						(Signature of Co-Applicant)
37.	prerequisite to pr that all requirement amount set forth	oviding assistance of the tents of pertinent regulation above, and by this docum	type indicated as have been c ent, subject to	above have be omplied with. the availability the availability	en made and that e I hereby approve tl v of funds, the Gov	tifications required by regulations vidence thereof is in the docket, and the above-described assistance in the ernment agrees to advance such ulations applicable to this type of
						(Signature of Approving Official)
		Ту	ped or Printed	Name: 3/4	KBAKA BI	ARd-Histor
Date	Approved:	8/31/2016	<u>.</u>	Title: <u>ACL</u>	ing State	Director
38.		,				application for financial assistance and other conditions required by

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