RURAL UTILITIES SERVICE BORROWER ACH PAYMENT FORM

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to borrower's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House (ACH) Payment System.

| AGENCY INFORMATION | | | | | | | | |
|-------------------------------|---------|-----------------------------|-------------------|-------|-------|--|--|--|
| FEDERAL PROGRAM | I AGENC | Y: | | | | | | |
| Rural Utilities Service | | | | | | | | |
| AGENCY IDENTIFIER: | | AGENCY LOCATION CODE (ALC): | ACH FORMAT: | | | | | |
| | | 12310100 | CCD+ | 🗆 стх | 🗌 СТР | | | |
| ADDRESS: USDA/RUS | | | | | | | | |
| 1400 Independence Avenue, SW | | | | | | | | |
| STOP 1595, Room 2808-S. Bldg. | | | | | | | | |
| Washington, D.C. 20250-1595 | | | | | | | | |
| CONTACT PERSON NAME: | | | TELEPHONE NUMBER: | | | | | |
| Peter Aimable | | | (202) 720-1025 | | | | | |
| ADDITIONAL INFORM | MATION | | | - | | | | |

| PAYEE/COMPANY INFORMATION | | | | | |
|---------------------------|-----------------------------|--|--|--|--|
| NAME: | SSN NO. OR TAXPAYER ID NO.: | | | | |
| ADDRESS: | | | | | |
| | | | | | |
| | | | | | |
| CONTACT PERSON NAME: | TELEPHONE NUMBER: | | | | |

| FINANCIAL INSTITUTION INFORMATION | | | | | | | |
|---|-------------------|---------|-----------------|--|--|--|--|
| NAME: | | | | | | | |
| ADDRESS: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| ACH COORDINATOR NAME: | TELEPHONE NUMBER: | | | | | | |
| NINE-DIGIT ROUTING TRANSMIT NUMBER: | | () | | | | | |
| NINE-DIGIT ROUTING TRANSMIT NUMBER: | | | | | | | |
| | | | | | | | |
| DEPOSITOR ACCOUNT TITLE: | | | | | | | |
| | | | | | | | |
| DEPOSITOR ACCOUNT NUMBER: | | | LOCKBOX NUMBER: | | | | |
| | | | | | | | |
| TYPE OF ACCOUNT: | | | | | | | |
| CHECKING | SAVINGS | LOCKBOX | | | | | |
| SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL: | TELEPHONE NUMBER: | | | | | | |
| (Could be the same as ACH Coordinator) | | | | | | | |
| | | () | | | | | |