PROCEDURE REFERENCE

: FmHA Instruction 1900-D

PURPOSE

: Used by designated FmHA processing/servicing officials to certify that FmHA assistance to an employee, relative or associate has received no advantage and that there is no conflict of interest.

UNITED STATES DEPARTMENT OF AGRICULTURE FARMERS HOME ADMINISTRATION (Location)

Date:

Certification for FmHA assistance to an employee, relative or associate.

I hereby certify that the recipient of this assistance has not received and will not receive any advantage by virtue of the relationship or association with FmHA, described in the attached Guide Letter 1900-D-2, and that there is no conflict of interest as defined in FmHA instruction 2045-BB.

Designated processing/servicing official Title