<u>NOTE:</u> The attached form document is provided for illustrative purposes only and should not be revised or relied on for any other purpose and is subject to further modification by the CDFI Fund. The exact terms and conditions of this document will be set forth in the final document that is executed by each party.

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names [a. ORGANIZATION'S NAME] [b. INDIVIDUAL'S LAST NAME] [c. MAILING ADDRESS] [c. MAILING ADDRESS] [c. MAILING ADDRESS] [c. MAILING ADDRESS] [c. MAD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION 2g. ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION 2g. ORGANIZATIO		OW INSTRUCTIONS AME & PHONE OF CO						
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3c. MAILING ADDRESS CITY STATE POSTAL CODE CO	3c. M	AILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
4. This FINANCING STATEMENT covers the following collateral:	4. Th	is FINANCING STATEMEI	NT covers the follow	ving collateral:		<u> </u>		