(Rev. 9-97) United States Dep		<i>ition 3</i> tment of Agriculture evelopment	FORM APPROVED OMB NO. 0570-0014
STATEMENT OF PERSONAL	HISTORY	NOTICE: All individuals required to complete th the filing of an application for a B&I I RD 410-9, "Statement Required by the	loan, will be given a Form
Name and address of loan applicant (<i>Firm name</i>) (<i>Street, City, State and Zip code</i>)		Type of business (Check one) □ Private corporation (for profit) □ Sole owner □ Private corporation (non-profit) □ Partnership □ Public corporation (non-profit) □ Other (Explain	
Employer ID Number: 1. Personal Statement of: (State name in full, if n (NMN), or if initial only First Middle Maiden		3. a. Place of birth (<i>City and State or for</i> b. Date of birth (<i>month, day, year</i>)	oreign country)
		4. Citizen of United States? Image: Yes	es 🗆 No
		5. Social Security No.	
Name of Spouse:		6. a. Relationship to Applicant.	
2. Marital Status: ☐ Married ☐ Sing	le 🗆 Other	b. Give the percentage of ownership owned in the applicant.	o or stock owned or to be
7. Are you presently under indictment, on pa	role or probation? If	yes furnish details on a separate sheet.	🗆 Yes 🛛 No
8. Have you ever been charged with or arrest motor vehicle violation? If yes, furnish det			🗆 Yes 🔲 No
9. Starting with present address, list residence <u>Date</u> <u>Street and Number</u>	e addresses during the	last ten years. <u>City</u>	<u>State</u>
10. Starting with present employer list all employers during last ten years: <u>From</u> <u>To</u> <u>Employer</u> <u>Address</u>			
or agency of the United Sta a material fact, or makes a	n, should be set forth ited States Code provi- tes knowingly and wil ny false, fictitious or ing the same to contai	below and on the back of this form, if nee des: "Whoever, in any matter within the jur lfully falsifies, conceals or covers up by a fraudulent statements or representations, n any false, fictitious or fraudulent statem	eded. isdiction of any department ny trick, scheme, or device or makes or uses any false
Date Title		Signature	
According to the Paperwork Reduction Act of 1995, no perso control number for this information collection is 0570-0014. reviewing instructions, searching existing data sources, gather	The time required to complete i	this information collection is estimated to average 1 hour p	per response, including the time for

FORM RD 449-4

Used by loan applicants and others such as the proprietor (owner) if the applicant is a sole proprietorship, or by each general and each limited partner if the applicant is a partnership, or by each officer, each director, each key employee, and each stockholder holding 20% or more of applicant's voting stock, if the applicant is a corporation, when applying for a loan from a rural bank.

PROCEDURE FOR PREPARATION

PREPARED BY

NUMBER OF COPIES

SIGNATURES REQUIRED

DISTRIBUTION OF COPIES

- : RD Instruction 1980-E.
- : State Office official.
- : Original and two copies.
- : State Office official.
- : Original to Lender; copy to State Office; copy to applicant..

(10-29-97) PN 281