EXPORT-IMPORT BANK OF THE UNITED STATES

Export-Import Bank of the United States

NOTICE OF CLAIM AND PROOF OF LOSS – WORKING CAPITAL GUARANTEE

This Notice of Claim and Proof of Loss – Working Capital Guarantee application is for requesting a claim payment under the Working Capital Guarantee program. An on-line version of this Notice of Claim and Proof of Loss is available on EXIM's website. EXIM encourages customers to submit in EXIM Online, https://eximonline.exim.gov/apps/bap, as it will facilitate EXIM's review and provide customers a faster response time.

SECTION A. Name and Address (Please provide full names and address).

GUARANTEED LENDER MAKING DEMAND FOR PAYMENT

EXIM Transaction No.	
Master Guarantee Agreement (MGA) No.	
Name	
Address	
City	
State/Province	
Postal Code	
Country	
Contact Name	
Email	
Phone Number	

Current Holder of Original Promissory Note	

BORROWER - For additional parties, add a separate page

Name	
Address	
City	
State/Province	
Postal Code	
Country	
Contact Name	
Email	
Phone Number	

GUARANTOR - For additional parties, add a separate page

Name	
Address	
City	
State/Province	
Postal Code	
Country	
Contact Name	
Email	
Phone Number	

SECTION B. General Information

EXIM LOAN FACILITY

Reason for claim filing	
Was this guarantee approved under Lender's delegated authority?	☐Yes ☐No
Is this a transaction-specific loan?	☐Yes ☐No
Is there a Forbearance Agreement?	☐Yes ☐No If yes, Agreement Date(s): MM/DD/YYYY
Type of loan facility	☐revolving loan facility ☐transaction-specific loan facility ☐transaction-specific revolving loan facility ☐Supply Chain facility
Is this loan under a fast-track lender program?	☐Yes ☐No
Is this a loan under city/state program?	☐Yes ☐No
Is this loan under a trade association partnership program?	☐Yes ☐No
Effective date of the Facility	MM/DD/YYYY
Last date Facility was renewed	MM/DD/YYYY
Facility extension(s) granted (please list all extensions)	MM/DD/YYYY
Maximum amount of Facility approved	$
Final Disbursement Date approved	MM/DD/YYYY
Advance rate of collateral	___% inventory ___% receivables ___ % Other _____
What are the products provided by the Borrower?	
Date of the last disbursement	MM/DD/YYYY
Outstanding Principal balance of the EXIM loan	$
Claim filing extension granted by EXIM?	☐Yes ☐No Date(s):
Indirect export(s) included?	☐Yes ☐No
Date of default	MM/DD/YYYY
Note approval date	MM/DD/YYYY
Demand Letter to Borrower	MM/DD/YYYY
Demand Letter to Guarantor(s)	MM/DD/YYYY

DOMESTIC LINES AND COLLATERALIZATION

Is there a domestic loan	☐Yes ☐No
Outstanding amount of the domestic line	$
Is the domestic line current?	☐Yes ☐No
Is the Domestic line collateralized?	☐Yes ☐No
Is there cross-collateralization?	☐Yes ☐No
Other loan facilities extended to the Borrower (list the Facilities and amounts outstanding)	
Collateral of the domestic line and other credit facilities extended	

LOAN INSURANCE

Is there a related insurance policy from EXIM?	☐Yes ☐No
If “YES”, EXIM Policy number(s)	
Is there a related insurance policy from another insurer?	☐Yes ☐No
If 'Yes”, policy number(s), name and address of the insurer(s) etc.	

SECTION C. BUSINESS STRUCTURE INFORMATION

NAICS Code	Status of Borrower’s operation
Business structure of the Borrower	☐Proprietorship ☐Corporation ☐Partnership ☐Limited Partnership ☐Government Non-Sovereign ☐Government Sovereign
Borrower’s type of business	☐Wholesale ☐Manufacturing ☐Retail ☐Processing ☐Contractor ☐Service ☐Government ☐Other

SECTION D. DOCUMENTATION AS PER MGA ARTICLE 5.01

Were all Disbursements made after receipt of a Borrowing Base Certificate and its supporting documentation as per MGA?	☐Yes ☐No Add Comment:
Were all Disbursements made prior to the Final Disbursement Date?	☐Yes ☐No Add Comment:
Was the Borrower current under the Working Capital loan facility at time of disbursement(s)?	☐Yes ☐No Add Comment:
Were all disbursements under the Working Capital loan facility less than or equal to the borrowing base?	☐Yes ☐No Add Comment:
Were Disbursements made in agreement with the conditions and prohibitions stated in the Loan Authorization Agreement, the Borrower Agreement, and the Master Guarantee Agreement?	☐Yes ☐No Add Comment:
Are the items financed those identified in the Loan Authorization Agreement?	☐Yes ☐No Add Comment:
Is the transaction in compliance with all special conditions?	☐Yes ☐No Add Comment:
Is the transaction in compliance with requirements of the Country Limitation Schedule in force at time of approval?	☐Yes ☐No Add Comment:
Is the Loan Authorization Agreement or Notice (Annex A) signed by an authorized officer of Lender or affiliate and EXIM?	☐Yes ☐No Add Comment:
Is the Borrower Agreement signed by all relevant parties?	☐Yes ☐No Add Comment:
To the best of the Lenders knowledge, all terms and conditions of the Borrower Agreement have been met.	☐Yes ☐No Add Comment:
Are the loan documents free of any binding alternative dispute resolution provisions?	☐Yes ☐No Add Comment:
If required, has the Borrower provided all financial statements to the Lender?	☐Yes ☐No Add Comment:
Have the field examinations been conducted if required by the MGA?	☐Yes ☐No Add Comment:

If required, has a valid, enforceable, and perfected security interest been obtained and maintained?	☐Yes ☐No Add Comment:
Was the facility fee(s) paid in full and on time?	☐Yes ☐No Add Comment:
Was this delinquency on the part of the borrower and guarantors reported to credit agencies?	☐Yes ☐No Add Comment:

All documents must be submitted with the claim filing.

Promissory Note	☐ Attached
Evidence of Payment of the Facility Fee	☐ Attached
Executed copy of Loan Authorization Notice or Loan Authorization Agreement (Annex A of the MGA)	☐ Attached
Executed copy of Borrower Agreement	☐ Attached
Executed copy of the Loan Agreement	☐ Attached
Executed copy of Fast Track Lender Agreement, if applicable	☐ Attached
Delegated Authority Letter Agreement	☐ Attached
Security Agreement	☐ Attached
Subordination Agreement, if required	☐ Attached
All filed UCC financing statement(s)	☐ Attached
Evidence of a lien search of UCC records which indicates a perfected security interest	☐ Attached
Field examination reports	☐ Attached
Financial statements, if required	☐ Attached
Borrowing Base Certificate(s) for the six- month period preceding the date of the Payment Default (MGA Article 5.01(b)(vii))	☐ Attached
Supporting Accounts Receivable Aging Reports and sample copies of Invoices or export orders (MGA Article 5.01(b)(vii))	☐ Attached
Export orders or summaries of export order and inventory schedules if applicable (MGA Article 5.01(b)(viii))	☐ Attached
Records of final foreign purchase if indirect exports are included in Loan Facility (MGA Article 5.01(b)(x))	☐ Attached
Lender's records regarding disbursements and application of payments to the loan (loan transaction history)	☐ Attached
Assignment of EXIM or other insurance policy (If insurance is used)	☐ Attached
Material records regarding satisfaction of the Special Conditions	☐ Attached
Demand Letter to Borrower	☐ Attached
Demand Letter to Guarantor(s)	☐ Attached
4.06 Compliance certifications	☐ Attached
Economic Impact certifications	☐ Attached
Bankruptcy notice or court order in the event demand is prohibited under the bankruptcy law	☐ Attached
Copies of communication to and from EXIM regarding Events of Default	☐ Attached
Copies of correspondence to and from EXIM concerning waivers and modifications	☐ Attached

Copies of claim filing extensions granted by EXIM	☐ Attached
Other	☐ Attached

SECTION E – CLAIM PAYMENT CALCULATION

PROMISSORY NOTE

Note amount	$
Note date	MM/DD/YYYY
Frequency of interest payment	☐Daily ☐Monthly ☐Quarterly ☐Other_____
Method of interest calculation	☐360/360 ☐360/365 ☐365/365
Note repayment terms	
Type of interest	☐Fixed ☐Floating
Interest rate basis	☐Prime ☐ SOFR ☐ OTHER
Guaranteed interest rate. (list all interest rates and the time period they apply)	
Principal outstanding	$
Interest paid to	MM/DD/YYYY
Last interest payment date	MM/DD/YYYY

OTHER ELIGIBLE OUT-OF-POCKET COSTS CLAIMED

Enforcement Costs	$
Collateral Protection Costs	$
Realization Costs	$

CALCULATION OF ESTIMATED LOSS

Principal Outstanding	$
(+) Interest	$
(+) Enforcement Costs	$
(+) Collateral Protection	$
(+) Realization costs	$
Total claimed loss	$

SECTION F - WIRE INSTRUCTIONS AND TAX ID

Routing Bank Name: _____

Routing Bank Address: _____

Recipient Bank Name: _____

Recipient Bank Address: _____

ABA No. _____

Account Name: _____

Account No. _____

Tax ID No. _____

Attention: _____

Reference No., if any: _____

Additional Comments: _____

SECTION G – CERTIFICATIONS AND SIGNATURE

Please refer to the "Certifications for Notice of Claim Proof of Loss – Working Capital Guarantee" set forth in Form EIB 23-01 posted on the EXIM website at https://img.exim.gov/s3fs-public/documents/eib-23-01-certifications-for-wcg-claim.pdf?VersionId=AzMWbNUCHXpXqR4OvBMK5Bg2mxxt45Vc (the "Certifications"). **THE CERTIFICATIONS ARE INCORPORATED INTO THIS NOTICE OF CLAIM PROOF OF LOSS AS IF FULLY AND DIRECTLY SET FORTH HEREIN**. When signing this Notice of Claim Proof of Loss – Working Capital Guarantee in the space provided below, the undersigned authorized representative signing on the Lenders behalf certifies and represents that he or she is fully authorized to sign on the Lender's behalf, and that **HE OR SHE HAS READ** the Certifications referenced above **AND IS CERTIFYING** to all the certifications set forth in the Certifications.

The Lender further certifies that the representations made, and the facts stated in this Notice of Claim Proof of Loss – Working Capital Guarantee and its attachments **are, true and the Lender has not misrepresented or omitted any material facts**. The Lender further covenants that if any statement set forth in this application or in the Certifications, becomes untrue, or is discovered to have been untrue when made, the Lender will promptly inform EXIM of all such changes or discoveries. The Lender further understands that in accepting or approving this application, EXIM is relying upon the Lender's statements set forth in the application and in the Certifications, and all statements and certifications to EXIM are subject to the penalties for false or misleading statements to the U.S. Government (18 USC § 1001, et. seq.).

I,_____, do hereby certify that I am the duly appointed and qualified _____
(Title)
of_____and that as such I am authorized to execute this application
(Name of Lender)
on behalf of_____.
(Name of Lender)

In witness whereof, I have hereunto signed my name this _____day of_____. 20_____.

Signature of Lender's Authorized Representative

_____

Date: _____

Name of Lender's Authorized Representative: _____

Title: _____

Name of Lender: _____

Street Address: _____

City: _____

State/Province: _____ Postal Code: _____

Email: _____

Phone Number: _____

NOTICES

The Lender is hereby notified that information requested by this application is done so under authority of the Export-Import Bank Act of 1945, as amended (12 USC 635 et. seq.); provision of this information is mandatory and failure to provide the requested information may result in EXIM being unable to determine eligibility for support. If any of the information provided in this application changes in any material way or if any of the certifications made herein become untrue, the applicant must promptly inform EXIM of such changes. The information provided will be reviewed to determine the participants' ability to perform and pay under the transaction referenced in this application. EXIM may not require the information and applicants are not required to provide information requested in this application unless a currently valid OMB control number is displayed on this form (see upper right of each page). EXIM reserves the right to decline to process or to discontinue processing any application.

Paperwork Reduction Act Statement: We estimate that it will take you about 6 hours to complete this form. This includes the time it will take to read the instructions, gather the necessary facts, and fill out the form. However, you are not required to provide information requested unless a valid OMB control number is displayed on the form. If you have comments or suggestions regarding the above estimate or ways to simplify this form, forward correspondence to EXIM and the Office of Management and Budget, Paperwork Reduction Project, OMB# 3048-0035 Washington, D.C. 20503