

## CDC STATUS UPDATE REPORT

		Submitted by:			
Name of CDC:					
Contact Person:					
Contact Telephone:			Contact Fax:		
Date of this Report:		Quarter ending: 01	nuarter ending:		
SBA Loan #:		SBA Loan Name:			
This section for Pre-debe SOP 50 55 Chapter 3. A CD its portfolio that is 60 days or s Semi-annual prepayment da	C must submit a Quarterl more past due until the d	ly Delinquency Report	to the appropriate hased.	SBA Loan Center on each loan in	
Next payment due date:	Com	Comments: please enter in the box below.			
minimum, a description of the b. Collateral; c. Work out nego	status of the following: a tiations; d. Recoveries ar	a. Obligors; and expenses incurred; an	nd, liquidation and	with a written report that includes, at a d litigation proceedings.	
	Purchase date:	Status (choose o	one)		
Comments					

Fresno Commercial Loan Service Center

A printed copy of this form may be faxed to 202-481-6481, emailed to FSC.504Liquidations@sba.gov, or sent automatically via email by clicking below.

Little Rock Commercial Loan Service Center A printed copy of this form may be faxed to 202-741-6930, emailed to LRSC.504Liquidation@sba.gov, or sent automatically via email by clicking below.