INS	INSTANCE OF DISCRIMINATION DETAILS Applicant's Social Security Number or Individual Taxpayer ID Number					
of p	ere is more than one instance of discrimination, please identify each instance with a nu ages 24 through 27. Copy pages 23 through 27 and fill them out and attach for each ins ets to respond to any question, reference this instance number on the additional pages	stance. If you need to attach additional				
Inst	ance Number:					
	Check here if you have attached additional pages with details for this instance.					
a.	Describe this instance of discrimination by USDA:	Supporting Documentation Requests				
		Please indicate which of the below documents have been attached to your Application. Select all that apply.				
		 To document your allegations of discrimination, you <u>may</u> provide: Any documentation you possess of a complaint or assertion of discrimination that was close in time to the events. (e.g. complaint itself or a response to it) Communications with the USDA 				
		(including FSA), or lending institution that include any discriminatory statements, including any available name, title, or position details of the representatives that made such statements				
		Statement under penalty of perjury from a non-family member and how they have knowledge of the discrimination				
		Other (please specify the document type or title):				
	(Attach additional sheets as necessary – reference this instance number on additional pages attached)					

USDA Discrimination Financial Assistance Program (DFAP) STEP 5 (continued)

b.

stance Number:	Supporting Documentation Requests		
Describe why you think you were eligible for the loan or loan action you requested. (For example, describe your education, farm experience, farm loan history, credit, collateral, how you met the financial requirements or program requirements for obtaining the requested loan or loan action; etc.):	To document your eligibility for the requested loan or loan action, you <u>may</u> provide any pertinent documentation, including, for example:		
	Agricultural education (please specify the document type or title):		
	Farm work experience (please specify the document type or title)		
	Farm loan history (please specify the document type or title)		
	Credit (please specify the document type or title)		
	Collateral (please specify the document type or title)		
	Statement under penalty of perjury from a non-family member and how they have knowledge of your eligibility (please specify the document type or title)		
	Other documents that demonstrate that you met the financial requirements or program requirements for obtaining the requested loan or loan action (please specify the document type or title)		
(Attach additional sheets as necessary – reference this instance number on additional pages attached)			

USDA Discrimination Financial Assistance Program (DFAP) STEP 5 (continued)

Ins	tance Number:					
c.	Describe the basis of this discrimination	n:				
	Trace	sexual orientation	marital status			
	Color	gender identity	disability			
	national origin or ethnicity	religion	reprisal/retaliation for prior civil rights			
	sex	age age	activity			
d.	What happened that makes you believe USDA's actions were discriminatory? (For example, something that was said, or how others were treated in similar circumstances, or any other facts that suggest that discrimination occurred.)					
			eference this instance number on additional pages attached)			
e.	When and where did you experience of					
	Date:	Location:				
f.	What type of location was this? (e.g.,	county office, farm)				

Ins	tance Number:				
g. What were the reasons given (if any) for the discriminatory action you are describing?					
	(Attach additional sheets as necessary – reference this instance number on additional pages attached)				
h.	Who committed this act of discrimination against you? Please include as much information as you can about the individual(s) involved, including whatever you know about their name, title, position, etc.:	,			
	(Attach additional sheets as necessary – reference this instance number on additional pages attached)				

USDA Discrimination Financial Assistance Program (DFAP) STEP 5 (continued)

Γ

Instar	nce Number:							
. Die Ple	Did anyone else observe the discrimination or otherwise become aware of the discriminatory action against you? Please tell us who, and how they learned about this discrimination.							
. Is	there any other inf	ormation that	you feel supports	your claim that this	instance of disc	rimination occurre	ed?	
			(Attach addition	al sheets as necessa	arv - reference this	instance number o	n additional pages	attached)