

# EXPORT-IMPORT BANK-REPORT OF OVERDUE ACCOUNTS UNDER SHORT TERM POLICIES

(please type or print all information)

POLICY NUMBER : (          ) -          Report for period:          (Month)          (Year)  
(Prefix) (Number)

POLICYHOLDER: \_\_\_\_\_

Contact: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

BROKER: \_\_\_\_\_

Date Received  
*EXIM use only*

**OVERDUE REASON**  
 Cash Flow / Commercial Problems\*  
 Foreign Exchange Problems (local payment made)  
 Insolvency\*  
 Dispute\* (Product; terms; documents; etc.)  
 Slow Pay Typical  
 Natural Disaster  
 Buyer Re-Organizing  
 Other\*  
\*Please attach detailed explanation of the overdue item and prospect for recovery

Item	Buyer Name	COUNTRY	Actual Payment Terms	EOL Shipment Confirmation #	Shipment Date	EOL Shipment Report Date	Due Date	SHIPMENT AMOUNT	OVERDUE AMOUNT	REASON	
1											
2											
3											
4											
5											
6											
7											
8											
		PAGE TOTALS									
	complete only on last page ---->	REPORT TOTALS									

We hereby certify that this report is a true and complete statement as required by the policy, that we have read the additional notes and instructions on the reverse side and that we understand this form to the pertinent conditions of the policy.

Name of Preparer: \_\_\_\_\_

Phone: (      ) \_\_\_\_\_ - \_\_\_\_\_

Signature: \_\_\_\_\_

Date Prepared: \_\_\_\_\_, \_\_\_\_\_  
(Month) (Day) (Year)

Page No. \_\_\_\_ of \_\_\_\_ pages

**WHO TO CONTACT:**

Export-Import Bank of the United States  
Export Credit Insurance Division  
811 Vermont Ave. N.W.  
Washington, DC, 20571  
TEL: (202 ) 565-3644 or 3681  
Email: [PMA\\_ECI Mailbox](#)

USE SEPARATE REPORT-FORMS WHEN REPORTING OVERDUE ACCOUNTS UNDER DIFFERENT POLICIES OR DIFFERENT POLICY NUMBERS.

**NOTE 1.** Check your policy to determine when you should begin to report an account as overdue.

**NOTE 2.** THE FOLLOWING ARE COLLECTION AND CLAIM FILING PROCEDURES TO BE FOLLOWED BY YOU IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE POLICY (UNLESS ALTERNATE ACTION IS APPROVED IN WRITING BY THE INSURER):

- a) You should make every effort to collect from the obligor. If you have not yet received a reply from the obligor as to the reasons for non-payment, you should write to the agent or sales representative, requesting assistance. (Copies of such correspondence must accompany the Proof of Loss Form if a claim is filed.)
- b) If the obligor has not accepted the goods (under a non-letter of credit transaction):  
You should not release the merchandise to the buyer on payment terms other than those originally agreed upon. You should consider the possibility of reselling the merchandise on the local market or of arranging for the immediate return of the merchandise to the United States, and consult with the insurer before taking any such action.
- c) Generally, you should make written demand for payment on the obligor and guarantor prior to claim submission. Rescheduling of maturity dates must not be granted by you unless specifically authorized by the insurer in writing or as specified in the policy for short-term sales.
- d) In order to file a claim, you must submit a properly completed Proof of Loss Form. All pertinent questions on that form must be answered and documentation requested therein must be submitted.
- e) **REFER TO YOUR POLICY FOR INSTRUCTIONS ON WHEN A CLAIM SHOULD BE FILED.**

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The applicant is hereby notified that information requested by this form 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 Ex-Im Bank being unable to determine eligibility for support. Ex-Im Bank 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).

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**Paperwork Reduction Act Statement:** We estimate that it will take you about 1/4 hour 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 Ex-Im Bank and the Office of Management and Budget, Paperwork Reduction Project OMB# 3048-0027; Washington, D.C. 20503.