

## REPORT OF COMPLIANCE ACTIVITY

|     |                    |
|-----|--------------------|
| TO: | 1. DATE:           |
|     | 2. CASE NUMBER:    |
|     | 3. DATE CASE OPEN: |

4. NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF ORGANIZATIONS AND INDIVIDUALS INVOLVED:

  
  
  
  
  

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5. TYPE OF CASE:

|   |                         |
|---|-------------------------|
| 6. <input type="checkbox"/> NEW <input type="checkbox"/> ACTIVE<br><input type="checkbox"/> INACTIVE <input type="checkbox"/> CLOSED BY THIS ACTION | 7. SOURCE OF REFERENCE: |
|---|-------------------------|

8. DESCRIPTION OF PROPERTY INVOLVED:

  
  
  
  
  
  
  
  
  
  

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|                            |                                    |   |
|----------------------------|------------------------------------|---|
| 9. DATE PROPERTY ACQUIRED: | 10. DATE PROPERTY PLACED INTO USE: | 11. DATE PERIOD OF RESTRICTION EXPIRES: |
|----------------------------|------------------------------------|---|

|                       |                           |
|-----------------------|---------------------------|
| 12. ACQUISITION COST: | 13. ESTIMATED FAIR VALUE: |
|-----------------------|---------------------------|

14. ANALYSIS OR STATUS OF CASE *(attach copies of all pertinent correspondence and supporting documentation)*

  
  
  
  
  
  
  
  
  
  

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| 15. PROPOSED ACTION TO BE TAKEN BY THE REGION: | 16. ESTIMATED DATE FOR CLOSING CASE: |
|--|--------------------------------------|

|                        |                  |                        |       |
|------------------------|------------------|------------------------|-------|
| 17. PREPARED BY:       | 18. APPROVED BY: |                        |       |
| SIGNATURE OF PREPARER: | DATE:            | SIGNATURE OF APPROVER: | DATE: |