



Adverse Debt Event Reporting Form

Notice of Debt Default

This form is pursuant to and authorized by Tenn. Code Ann. § 9-21-134(d) and Tennessee State Funding Board Guidelines for Debt Reporting by Public Entities.

Complete the following form. Email the completed form **and** either a copy of the loan documents, lease agreement, or other agreement to LGF@cot.tn.gov.

Step 1: Entity Name and Address

Enter Entity Name →

Street Address / P.O. Box →

City, State, Zip Code →

Step 2: Contact Information

The authorized entity representative is meant to be the main contact our office can speak with on issues pertaining to the entity or referenced debt. For example, Chief Operating Officer, Chief Financial Officer, Counsel, Financial Advisor, etc.

	Authorized Entity Representative	Form Preparer
Name →	<input type="text"/>	<input type="text"/>
Title →	<input type="text"/>	<input type="text"/>
Firm (or Gov) →	<input type="text"/>	<input type="text"/>
Phone →	<input type="text"/>	<input type="text"/>
Email →	<input type="text"/>	<input type="text"/>

Step 3: Information on Defaulted Debt Issue

Name of Debt →	<input type="text"/>
Amount of Debt →	<input type="text"/>
Type of Debt →	<input type="text"/>

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Security →		
Original Amount →		
Indicate Interest Type →	Fixed	Variable
Call Date →		
Has Put Option? →	Yes	No
Dated Date →		
Closing Date →		
Step 4: Information on Default Event		
Type of Default →		
Date of Default →		
Default Date as Reported on EMMA →		
Reason for Default →		
Plan to Cure →		
Step 5: Additional Comments (Optional)		
The field below is optional. If no additional comments are available, leave the field below blank.		
Step 6: Signatures		
If completing the form electronically, click within the applicable signature box and type your name.		
	Authorized Representative	Preparer
Signature →		
Date →		