



MEMORANDUM

Date:

To:

Copy to:

From:

Subject:

Executive Summary:

Loan Request:

Applicant:

Investment Type:

Amount Requested:

Amount Recommended:

Term Requested:

Term Recommended:

Requested Rate:

Recommended Rate:

Purpose:

Service Area:

Repayment:

Collateral:

History of Relationship with Dignity Health:

Use of Dignity Health Investment:

Conformance with Policy:

Conformance with Dignity Health Community Investment Social Criteria:

This loan meets the following Dignity Health Community Investment Social Criteria:

- **Targets resources to low-income communities.**
- **Invests in the revitalization of urban or rural areas.**
- **Safeguards the environment when linked to the health of the community.**

Description of Project (if applicable):

Organization Background and Track Record:

Board and Management

Financial Analysis:

Audited statements for fiscal years ending _____ are discussed below and summarized as an attachment to this memo.

Discussion of Financial Position:

Discussion of Income and Expense:

Risks and Mitigations:

Risks:

Mitigations:

Risk Rating:

Organizational Strength and Capacity:

Business Plan/Project Quality:

Financial Strength:

Definitions:

<u>Risk Rating</u>	<u>Description</u>
Low	Fully amortizing or firm take-out source; satisfactory operations; substantial borrowing history with Dignity Health; excellent collateral and cash flow; loan to value (LTV) is 80% or below
Moderate	Collateral, cash flow, and credit support loan—LTV is 80%–90%
Substantial	Collateral coverage is limited—LTV greater than 90%
High	Take-out source is speculative; collateral is inadequate or nonexistent; documentation deficiencies, no/limited financial reports available

Staff Recommendation: