## Fiscal Data in Support of Claim for Multifamily Mortgage Insurance Benefits

## U.S. Department of Housing and Urban Development Office of Housing Federal Housing Commissioner

OMB Approval No. 2502-0418 (exp.06/30/2021)

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

The information is collected to obtain required fiscal data for the Department to pay insurance benefits. The information provides the Department with the necessary fiscal data to audit the claim submission and accurately compute insurance benefits owed to the lender. Payment of such benefits is cited in Statute 12 USC 1713(g) of the National Housing Act. The information requested does not lend itself to confidentiality.

Date this Form Prepare	ared	2. Project No.	3. Proje	ect Name and Prop	erty Address				
Date to Which Interest Collected     S. Date of Default			6. Nature of Default					7. Date of Election to Assign or Convey	
=	Acquisitio Foreclos Deed in	Conveyed to the Sure	ssigned or Property Secretary Assigned Conveyed	10. Date Receiv	er Appointed	11. Date Re (if applicable	eceiver Dischargec e)	12. Employer Identifica (if applicable)	tion No.
Section I. Mortgage Balance and Disbursements	a. Unpaid Principal Balance of the Mortgage at Date of Default  b. Unpaid Balance of Advances by Mortgagee, Other than Mortgage Proceeds for:  1. Mortgage Insurance Premiums  2. Taxes, Ground Rents, Water Rates, etc. (Which are liens prior to the mortgage)  3. Insurance on the Property  c. Reasonable Expenses for Completion and Preservation of the Property						\$	\$ \$	
Escrow Fund and Deductions	d. Balance of the Principal Face Amount of the Mortgage Not Heretofore Advanced to or for the Account of, the Mortgagor and Paid to HUD (Debenture Claim Only)  Total Mortgage Balance and Disbursements  e. Funds in Escrow at Date of Assignment or Conveyance for:  1. Mortgage Insurance Premiums  2. Taxes, Ground Rents, Water Rates, etc.  3. Hazard Insurance Premiums						\$ \$ \$	\$ <b>\$</b>	
	4. Reserve for Replacements  5. Other  Total in Escrow Fund  f. Net Income Received from the Property from the date of default to the Date of Assignment or Conveyance:						\$ \$ \$		
	1. Total Collections (Schedule B)     2. Less: Operating Expenses (Schedule C)     g. Receipts from Other Sources after Default Date     h. One Per Cent (1%) of Item a., Above (Assignments or Net Claim				\$		\$ \$	\$	
Section II. Certificate of Claim	a. Foreclosure, Acquisition and Conveyance Cos  b. Reasonable Attorney's Fees Paid (Conveyances Only)  c. Amount Deducted Under Item h. of Section I  d. Other  Unadjusted Certificate of Claia  The amount of unadjusted claim will be increased by mortgage interest computed from the date or the property is conveyed, less the amount of debenture interest paid by HUD from the date of								assigned
ject to criminal and/or civil pe	rsigned, cert enalties, incl	property is conveyed, less ify under penalty of perjury that uding confinement for up to 5 ye. (Do not use A.D.P. rubbe	the information provided a ears, fines, and civil and a	above is true and corredministrative penalties	ct. WARNING: A	Anyone who kno 87, 1001, 1010	owingly submits a fals , 1012; 31 U.S.C. §37	e claim or makes a false stater	nent is sub
(Debentures if issued w Signature of Mortgagee X			rein) ginal and 1 copy to	Title			pan Developmer	Mortgagee Servicer	:Officia