



Seller/Service Information

Seller/Service Name		Seller/Service Number	
Address		Contact Person's Name	
City, State, Zip	Email	Telephone Number	Fax Number

Loan Information

Freddie Mac Loan Number	Seller/Service Loan Number
Borrower Name	Email
Address, City, State, Zip	Telephone Number

Principals/Guarantors

Principal's Name	Percentage of Interest	Email
Address, City, State, Zip		Telephone Number
Principal's Name	Percentage of Interest	Email
Address, City, State, Zip		Telephone Number
Principal's Name	Percentage of Interest	Email
Address, City, State, Zip		Telephone Number
Guarantor's Name	Percentage of Interest	Email
Address, City, State, Zip		Telephone Number
Current Management Company	Property Manager's Name	Email
Address, City, State, Zip		Telephone Number

Principals/Guarantors (cont.)

Project's Name	Original Loan Amount	Current Unpaid Principal Balance	
Address	Interest Rate	Default Interest Rate	
City, State, Zip	Due Date of Last Paid Installment		
Note Date	Purchase Date	Maturity Date	Personal Guaranty <input type="checkbox"/> Yes <input type="checkbox"/> No

As of the date of this from:

- a. Is any Borrower, Borrower Principal (including general partner or managing member or president), or guarantor or individual with liability for Mortgage amounts the target of any sanctions law that is administered or enforced by the U.S. Treasury Department Office of Foreign Assets Control (OFAC) or the U.S. Department of State, including a person or entity on the most current OFAC Specially Designated Nationals and Blocked Persons List or the OFAC Consolidated Sanctions List?
 Yes No (If Yes, provide explanation)
- b. Does any Borrower, Borrower Principal (including general partner or managing member or president), or guarantor or individual with liability for Mortgage amounts appear on the Freddie Mac Exclusionary List or the Freddie Mac Restricted Vendor List?
 Yes No (If Yes, provide explanation)
- c. Does any Borrower, Borrower Principal (including general partner or managing member of president), or guarantor or individual with liability for Mortgage amounts appear as a Named Party on the Federal Housing Finance Agency's Suspended Counterparty Program List?
 Yes No (If Yes, provide explanation)

Subordinate Financing

Subordinate Financing

No Yes; Complete This Section

Original Loan Amount	Current Unpaid Principal Balance	Approval Date	Approved By
Date of Last Title Report	Name of Subordinate Lienholder		
Interest Rate	Maturity Date	Recourse <input type="checkbox"/> No <input type="checkbox"/> Yes	Monthly Debt Service

Technical Defaults

Unauthorized Transfer <input type="checkbox"/> No <input type="checkbox"/> Yes	Unauthorized Financing <input type="checkbox"/> No <input type="checkbox"/> Yes	Bankruptcy <input type="checkbox"/> No <input type="checkbox"/> Yes, date filed
Waste <input type="checkbox"/> No <input type="checkbox"/> Yes	Other <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:	

Arrearage Information

Arrearage As Of (date) Due Date of Next Installment Monthly Principal and Interest

Total Arrearages

Monthly Escrow

Delinquent Principal

Tax

Delinquent Interest

Insurance

Default Interest

Water and Sewer

Delinquent Escrow (shortage)

Replacement Reserves

Escrow Advances

Other

Late Charges

Total Monthly Escrow

Other

Specify types and amounts

Funds in Suspense (if applicable)

Total Arrearages

For the months of

Default Summary

Expand on reason for default, summarize recent conversations with Borrower, describe property condition, etc.

Reason For Default

Conversations with Borrower

Property Condition

Additional Background

Assumption

Assumption

No Yes; complete this section

Date Approved

Original Borrower

Last Known Address

City, State, Zip

By electronically signing this Form on behalf of my company, I hereby certify and agree that I have confirmed that my company has determined that my Electronic Signature complies with the requirements in Guide Section 2.14, and that my Electronic Signature on this Form shall be as binding, valid and enforceable as my original written signature on a paper original of this Form.

I certify that this information is true and correct.

Authorized Signature

Date

Name

Title