

Issuer's Monthly Summary Report

U.S. Department of Housing and Urban Development
Government National Mortgage Association

OMB Approval No. 2503-0033 (Exp. 11/30/2008)

Public reporting burden for this collection of information is estimated to average less than a minute 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 required by Sec. 306(g) of the National Housing Act or by Ginnie Mae Handbook 5500.3, Rev. 1. The purpose of this information is to report to Ginnie Mae a summary of information on an issuer's outstanding pools or loan packages, to provide a certification as to the accuracy of the information reported, and to provide a format for RPB reporting. The information collected will not be disclosed outside the Department with prior consent, except as required by law.

| | | | | | |
|-------------------------------------|------|--|------------------|--|--|
| Issuer (Name, Address and Zip Code) | | Submission Type <input type="checkbox"/> Original Report <input type="checkbox"/> Revised Report | | This report is only for <input type="checkbox"/> Ginnie Mae I Pools <input type="checkbox"/> Ginnie Mae II Pools/Loan Pkgs | |
| | | | | | |
| Number of Pools and Loan Pkgs. | Date | Reporting Month | Issuer ID Number | Issuer RPB Report ID Number | |

| (1) Installments Delinquent Consolidated Summary of All Pools/Loan Packages | | | | | | | (2) Total Escrow Funds | |
|---|----------------------|--------------------|-------------------------|-----|---------------|-------------|--|-----------------------------------|
| Total No. of Mortgages | Total No. Delinquent | Percent Delinquent | Installments Delinquent | | | Foreclosure | Percent 2 or More Months Delin. Excluding Foreclosures | (3) Total Funds Other Than Escrow |
| | | | One | Two | Three or More | | | |
| | | | | | | | | |

| | Total Guaranty Fee (4) | (Report Balances this monthend and Principal amount of securities this monthend shown on Form HUD-11710-A) | | | | Due Holders | |
|--------------|------------------------|--|-------------------------------------|--|--------------------------------------|---------------------|---------------------|
| | | Total No. of Mortgages (5) | Total Fixed Installment Control (6) | Total Pool/Loan Pkg. Principal Balance (7) | Total Security Principal Balance (8) | Total Principal (9) | Total Interest (10) |
| Total | | | | | | | |

| | | | |
|---|--|-----------------------------------|----------------|
| Ginnie Mae I Issuers Only | | Ginnie Mae II Issuers Only | |
| Date all checks mailed or funds electronically remitted to holders last month (Ginnie Mae I only) | | ACH Bank (Name and Address) | Account Number |
| | | | |

All Issuers

| | |
|----------------------|----------------------------------|
| Authorized Signature | Printed Name |
| Title | Phone Number (include Area Code) |

By signing above, I hereby certify that the information contained herein and contained in each Form HUD-11710-A report in hard copy form or electronic transmission is true and accurate to the best of my knowledge and belief.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Previous editions are obsolete