Issuer's Monthly Summary Report

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

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. Ginnie Mae 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 except as required by law.

Issuer (Name, Address and Zip Code)			ission Type Driginal Report Revised Report	This report is only for Ginnie Mae I Pools Ginnie Mae II Pools/Loan Pkgs	
Number of Pools and Loan Pkgs.	Date	Reporting Month	Issuer ID Number	Issuer RPB Report ID Number	
	•	•	•		

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

		(Report	Balances this monthend this month end)	Due Holders			
	Total Guaranty Fee (4)	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 submitted electronically in the RFS Issuer Monthly Report of Pool and Loan Data 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