Issuer's Monthly Summary Report

U.S. Department of Housing and Urban Development

Government National Mortgage Association

OMB Approval No. 2503-0033 (Exp. 04/30/2026)

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)									ion Type inal Report ised Report	This report is only for Ginnie Mae I Pools Ginnie Mae II Pools/Loan Pkgs	
Number of Pools and Loan Pkgs. Date Reporting Mont								I	ssuer ID Number	Issuer RPB Report II) Number
(1) Inst	allment	s Deline	quent Cor	solidated Su	mmary of All	Pools/Le	oan Package	es		(2) Total Escrow Fu	nds
Total No. of Mortgages		Total No. Delinquent		Percent One One		ments De Two	elinquent Three or More	Foreclo	Percent 2 or More Months Delin. Excluding Foreclosures	(3) Total Funds Other Than Escrow	
							(Z)		•		
	(Report Balances this monthend and Print this month end)					d and Princip	al amoun	t of securities	Due Holders		
	Gua	ital ranty ee	N	otal o. of tgages	of Installm		m ent Pkg. F		Total Security Principal Balance	Total Principal	Total Interest
Total	(4)		(5)		(6)		(7)		(8)	(9)	(10)
Ginnie Mae I Issuers Only								1	e Mae II Issuers Only		
Date all checks mailed or funds electronically remitted to holders last month (Ginnie Mae I only)								ACH B	ank (Name and Address	Account Number	
All Issue	ers	Ó						 			
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)