

Allocation of Mortgagee Receipts and Disbursements
Schedule A Sheet of

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 1.25 hours 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. Send comments regarding this burden estimate or any other aspect of this collection of information on, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2502-0415), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. 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.

I certify that the information provided on this form and in any accompanying documentation is true and accurate. I acknowledge that making, presenting, or submitting a false, fictitious, or fraudulent statement, representation, or certification may result in criminal, civil, and/or administrative sanctions, including fines, penalties, and imprisonment.

1. Mortgagee (Name and Address)	2. Project (Name and Location)	3. Project Number
		4. Date Mortgagee Assumed Control of Project
		5. Date Mortgagee Relinquished Control of Project

Date Received or Paid (1)	Total Amount Received or Paid (2)	Due Date (3)	Escrow Deposits Allocated to: Mortgage Insurance Premiums (4)							Reserve for Replacements (If any) (10)	Other (Receipts after Date of Default, Return Premiums on Insurance, etc.) Explanation (11)	Other (Receipts after Date of Default, Return Premiums on Insurance, etc.) Amount (12)
			Escrow Deposits Allocated to: Mortgage Insurance Premiums (4)									
			Escrow Deposits Allocated to: Mortgage Insurance Premiums (4)	Escrow Deposits Allocated to: Ground Rents Taxes, etc. (5)	Escrow Deposits Allocated to: Hazard Insurance (6)	Escrow Deposits Allocated to: Other (7)	Mortgage Indebtedness Allocated to: Interest on the Mortgage (8)	Mortgage Indebtedness Allocated to: Mortgage Principal (9)				
Totals (Forwarded)												

Certification: I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct.

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Signature	Date
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