FORM RD 451-19 (1-1-72) UNITED STATES DEPARTMENT OF AGRICULTURE RURAL DEVELOPMENT-FINANCE OFFICE 1520 MARKET STREET, ST. LOUIS, MISSOURI 63103

STATEMENT SHOWING DISTRIBUTION OF PAYMENT AND BALANCE ON INSURANCE CONTRACT

ATTACH THIS STATEMENT TO YOUR INSURANCE CONTRACT. PREVIOUS STATEMENTS ARE OUT OF DATE.

				DISTRIBUTION OF PAYMENT						
HOLDER NUMBER	IDENTIFICATION OF CONTRACT		INTEREST	INTEREST	PRINCIPLE	TOTAL	UNPAID PRINCIPLE	DATE OF		
	SERIES	NUMBER	RATE %	INTEREST	FRINCIPLE	TOTAL	AS OF DATE OF CHECK		DAY	_

Reflected above under "Distribution of Payment" are the amounts due and paid herewith based on the Insurance Contract you hold.

The amount shown in the next to the last column is the adjusted Unpaid Principal owing on the notes covered by your Insurance Contract after applying this payment.

Interest is calculated on the basis on a 365-Day Year.