

APPENDIX XI-8 SSCRA QUARTERLY REIMBURSEMENT REQUEST

Issuer Name: _____
 Issuer Contact Name: _____
 Quarter Ending: _____

Issuer Number: _____
 Telephone Number: _____

CASE NUMBER	POOL NUMBER	NOTE INTEREST RATE	DIFFERENCE BETWEEN NOTE RATE AND 6%	DUE DATE OF COLLECTION RECEIVED	TOTAL PAYMENT RECEIVED (P&I ONLY)	AMOUNT OF INTEREST DUE AT NOTE RATE	SCHEDULED PRINCIPAL APPLIED TO LOAN	ADDITIONAL PRINCIPAL APPLIED TO LOAN	INTEREST COLLECTED PER SSCRA	REMAINING PRINCIPAL BALANCE OF LOAN	AMOUNT ELIGIBLE FOR REIMBURSEMENT
1.											
2.											
3.											
4.											
5.											
TOTAL										\$ _____	

I hereby certify that I have verified and documented that the above borrower(s) is entitled to the interest rate forgiveness under the Soldiers' and Sailors' Civil Relief Act. By signing this statement, I hereby certify that the information contained herein and electronically transmitted as part of this request is true and accurate to the best of my knowledge and belief.

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

By: _____
 Authorized Signature

 Printed Name and Title

 Telephone Number (including Area Code)

Date: _____

This form must be received by Ginnie Mae - SSCRA, c/o ACS-Government Services, Inc., One Curie Court, Rockville, MD 20850-4310.