Issuer's Monthly Summary Report

U.S. Department of Housing and Urban Development

The information is required by Sec. 306(g) of the National Housing Act or by Ginnie Mae Handbook 5500.3, Rev. 1.

Government National Mortgage Association

OMB Approval No. 2503-0004 (Exp. 07/31/2004)

Public reporting burden for this collection of information is estimated to average 15 minutes 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. 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.

Issuer (Name, Address and Zip Code)									ission Typ	е	This report is only for		
									Original I	Report	Ginnie Mae I Pools		
								Revised Report			Ginnie Mae II Pools/Loan Pkgs.		
												- ////////////////////////////////////	
Number of Pools and Loan Pkgs. Date Reporting Month								Issuer ID Number			Issuer RPB Report ID Number		
(1) Ins	tallments	Deling	uent Con	solidated Sur	nmary of A	II Pools/Lo	nan Package	s			(2) Total Escrow	Funds	
(1) Installments Delinquent Consolidated Summary of All Pools/Loan Package Installments Delinquent								Percent 2 or					
Total		Total		Percent	One	Two	Three	Foreclosure		More Months			
No. of Mortgages		No. Delinquent		Delinquent			or More			Delin. Excluding Foreclosures	(3) Total Funds Other Than Escrow		
3 13 1													
	(Report Balances this monthend and Principal amo								ecurities	Due l	Holders		
				this monthend shown on Form				<u>'</u>					
Tot Guara						al Fixed tallment				Total Security Principal	Total Principal	Total Interest	
Fe		e M		lortgages		ontrol		Pkg. Principal Balance		Balance			
(4		4)		(5)		(6)		(7)		(8)	(9)	(10)	
Tatal													
Total													
Ginnie	Ginnie Mae I Issuers Only								Ginnie Mae II Issuers Only				
Date all checks mailed or funds electronically remitted to holders last month								ACH Bank (Name and Address)			Account Number		
(Ginnie	(Ginnie Mae I only)												
All Iss	uers												
Authorized Signature									Printed Name				
Title								Phone Number (Include Area Code)					
By sig	ning abov	ve, I he	reby certi	ify that the in	formation	contained	herein and	contain	ed in each	h Form HUD-1171	0-A report in hard co	py form or electronic	
transm	ission is	true ar	nd accura	te to the bes	t of my kno	owledge a	nd 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)