OMB Approval No. 2502-0328
(exp. 10/31/2012)

Worksheet for Reconcilement of Insurance Charges from the Title I Monthly Statement

Public reporting burden for this collection of information is estimated to average 1 hour 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 information is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

This information is being collected to permit more efficient risk management of the Title I loan portfolio as well as facilitate claims processing for loan defaults. The information provides a more comprehensive basis for evaluating Title I lender underwriting practices and thereby improving risk management of the loan portfolio and also enhances management's ability to determine appropriate policy changes affecting the Title I portfolio as a whole. While no assurances of confidentiality are pledged to respondents, HUD generally discloses this data only in response to a Freedom of Information request.

The use of this worksheet is optional. The worksheet is provided to assist Title I Lenders to make the proper deductions from their monthly bill amount and assist them to make the proper electronic payment using the Automated Clearing House (ACH) system.

	A. Total insurance charge on this statement	$	Contract Number
	B. Deductions: Schedule 1 $		Statement Date (MM/YYYY)
	Deductions: Schedule 2 $		
	Total Deductions from Schedules 1 and 2	$	
	C. Amount of Remittance (A-B)	$	

Schedule 1. Loans Paid in Full Prior to Insurance Charge Due Date.
All other allowable deductions should be listed under Schedule 2.

Title I Case Number	Name of Borrower	Date of Loan Dusbbursement MM/DD/YY	Date Paid in Full MM/DD/YY	Insurance Charge
			Total	

See additional schedules on the back

Schedule 2. Insurance charge remittances withheld for other reasons. The Standard Codes for reason for withholding are: (D=Duplicate Loan; N=Not Our Loan; C=Claim Filed Prior to This Statement; I=Ineligible for Insurance).

Title I Case Number	Name of Borrower	Code	Reason for Withholding Remittance	Insurance Charge
			Total	

Schedule 3. Differences in loans listed on current monthly statement.

Title I Case Number	Should Be Name of Borrower	Should Be Institution Loan No.	Date of Ln. Disb. MM/DD/YYYY	Should Be Loan Amount	Should Be Term

Schedule 4. Loans reported but not shown on monthly statement

Date Reported	Name of Borrower	Loan Amount

Schedule 5. Refinanced loans reported 60 days or more prior to the date of this monthly statement.

Date Reported	Name of Borrower	Loan Amount