FannieMae

Request for Verification of Deposit

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by title 38, USC, Chapter 37 (if V.A.); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

Instructions:

Lender - Complete items 1 through 8. Have applicant(s) complete item 9. Forward directly to depository named in item 1.

Depository - Please complete items 10 through 18 and return directly to lender named in item 2.

The f	orm is to I	be transmitted dire	ectly to the lende	r and is				olicant(s	s) or any other part	у.			
					Part I -								
1. To (Name and ad		2. From (Name and address of lender)											
Wells Fargo	Jason Domazet Verifier - JASON DOMAZET												
I certify that this verifica	ation has I	been sent directly	to the bank or d	eposito	rv and has not pa	ssed throu	ugh the har	nds of t	he applicant or any	other party	v.		
Signature of Lender	tle				5. Date	6. Lender's No. (Optional)							
7. Information To Be	Verified												
Type of Account	Acco	ount in the Name		Account Number				Balance					
DDA	JOI	HN FRANCIS		3306104005				\$					
											\$		
										\$			
T. D		1. 1.							1 2 21	\$			
To Depository: I/Wo to verify this informati which no responsibili	ion and to	supply the lende	er identified abo	ve with	the information								
which no responsibility is attached to your institution or any of your officers. 8. Name and Address of Applicant(s)							9. Signature of Applicant(s)						
,						or orginate or reprise in(o)							
JOHN FRANCIS						X							
						X							
		5.0.1.											
					Be Complete		<u> </u>						
				Part	II – Verifica	tion of D	eposito	ry					
10. Deposit Accounts	of Appli	cant(s)											
Type of Account Account Number				Curre	nt Balance		Ave	Average Balance For Previous			s Two Months Date Opened		
DDA		3306104005		\$		289.58		\$ 419.72					
				\$			\$						
			\$					\$					
			\$					\$					
11 Loans Outstandin	οα Το Δην	olicant(s)		Ф			Ф						
11. Loans Outstanding To Applicant(s)									Τ	_	1		
Loan Number	Date of	Loan	Original Amount		Current Balance	ce I	Installments (I		nthly/Quarterly)	Secured	Ву	No. of Late Pmts.	
			\$		\$	\$	\$	р	er				
			\$		\$	\$	\$	р	er				
			\$		\$	\$			er				
12. Please include any	additiona	al information which	h may be of assi	istance	in determination	of credit wo	orthiness.	(Pleas	e include information	on on loans	paid-in-full	in item 11 above.)	
13. If the name(s) on t	ho accour	ot(s) differ from the	so listed in itom	7 ploo	co cupply the per	ma(s) on th	no noncunt	·(c) oc r	offeeted by your re	oordo			
JOHN FRANCIS	ne accour	it(3) diller from the	isted in item	7, piea	se supply the hai	ne(s) on a	ie account	.(s) as i	ellected by your re	cords.			
				Pa	art III – Autho	orized Si	ignature						
								or cor	spiracy purposed	to influence	the issua	nce of any guaranty or	
14. Signature of Dep	r the HUD/CPD Assistant Secretary. 15. Title (Please print or type)						16. Date						
7 1. Orginaturo di Dop	10. 11.0 (1100	o (1 10000 print of typo)											
47.71						0	3/06/15	02:20:17 PM					
17. Print or type nam	•												
ACCOUNTCHEK he													
and correct in accord	4												
18. Phone No.													

Fannie Mae Form 1006 Mar. 90