

EXHIBIT A

SOUTHERN MORTGAGE ASSISTANCE PROGRAM

**FIRST MORTGAGE LOAN ORIGINATION PROGRAM
LENDER INFORMATION FORM**

Corporation LENDER ID NO.	TAX ID NO.
COMPANY NAME	HUD ID NO.
MAILING ADDRESS	Attn:

LIST PRIMARY CONTACT PEOPLE AND THEIR TELEPHONE NUMBERS

LOAN SHIPPING

LOAN CLOSING

ADMINISTRATIVE

FAX NUMBER

E-MAIL ADDRESS

WIRE TRANSFER INSTRUCTIONS TO TRANSFER FUNDS

BANK NAME

CITY

BANK ADDRESS

ATTN:

ACCOUNT NUMBER

ABA NUMBER

YOUR COMPANY NAME

MESSAGE (IF ANY)

ADDITIONAL COMMENTS

AUTHORIZED BY:

(SIGNATURE) (TYPED NAME)

DATE: