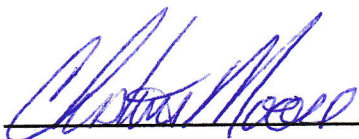


transaction. This may include, but is not limited to: a) my name, address, telephone number, b) my income c) my financial history and information about my account balances and activity. I understand and consent to Fannie Mae disclosing my personal information and any other data related to my request for assistance to the above identified Authorized Third Party.

Fannie Mae has no responsibility or liability for what an Authorized Third Party does with such information.

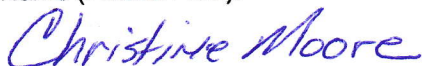
I understand that the sharing of my information with the above identified Authorized Third Party does not guarantee I will receive assistance from Fannie Mae. This authorization is valid until resolution of this inquiry.



Signature:

Date:

Name (Please Print):



Please return this form to Fannie Mae at :

[Resource\\_Center@Fanniemae.com](mailto:Resource_Center@Fanniemae.com)

ref:\_00D61fJHZ.\_5004NszsLc:ref