

# Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when  the income or assets of a person other than the "Borrower" (including the Borrower's spouse) will be used as a basis for loan qualification or  the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower \_\_\_\_\_ Co-Borrower \_\_\_\_\_

## I. TYPE OF MORTGAGE AND TERMS OF LOAN

<b>Mortgage Applied for:</b>	<input type="checkbox"/> VA	<input checked="" type="checkbox"/> Conventional	<input type="checkbox"/> Other (explain):	Agency Case Number	Lender Case Number
	<input type="checkbox"/> FHA	<input type="checkbox"/> USDA/Rural Housing Service			
Amount \$	Interest Rate %	No. of Months	<b>Amortization Type:</b>	<input checked="" type="checkbox"/> Fixed Rate	<input type="checkbox"/> Other (explain):
				<input type="checkbox"/> GPM	<input type="checkbox"/> ARM (type):

## II. PROPERTY INFORMATION AND PURPOSE OF LOAN

Subject Property Address (street, city, state, & ZIP)	No. of Units
Legal Description of Subject Property (attach description if necessary)	Year Built
Purpose of Loan <input checked="" type="checkbox"/> Purchase <input type="checkbox"/> Construction <input type="checkbox"/> Other (explain):	Property will be:
<input type="checkbox"/> Refinance <input type="checkbox"/> Construction-Permanent	<input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment

**Complete this line if construction or construction-permanent loan.**

Year Lot Acquired	Original Cost	Amount Existing Liens	(a) Present Value of Lot	(b) Cost of Improvements	Total (a+b)
	\$	\$	\$	\$	\$

**Complete this line if this is a refinance loan.**

Year Acquired	Original Cost	Amount Existing Liens	Purpose of Refinance	Describe Improvements	Cost: \$
	\$	\$		<input type="checkbox"/> made <input type="checkbox"/> to be made	

Title will be held in what Name(s)	Manner in which Title will be held	Estate will be held in:
Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain)		<input checked="" type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold (show expiration date)

## III. BORROWER INFORMATION

Borrower	Co-Borrower
Borrower's Name (include Jr. or Sr. if applicable)	Co-Borrower's Name (include Jr. or Sr. if applicable)
Social Security Number	Social Security Number
Home Phone (incl. area code)	Home Phone (incl. area code)
DOB (mm/dd/yyyy)	DOB (mm/dd/yyyy)
Yrs. School	Yrs. School
<input type="checkbox"/> Married (includes registered domestic partners)	<input type="checkbox"/> Married (includes registered domestic partners)
<input type="checkbox"/> Unmarried (includes single, divorced, widowed)	<input type="checkbox"/> Unmarried (includes single, divorced, widowed)
<input type="checkbox"/> Separated	<input type="checkbox"/> Separated
Dependents (not listed by Co-Borrower)	Dependents (not listed by Borrower)
No. _____	No. _____
Ages _____	Ages _____
Present Address (street, city, state, ZIP/ country) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs.	Present Address (street, city, state, ZIP/ country) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs.
/ United States	/ United States
Mailing Address, if different from Present Address	Mailing Address, if different from Present Address

**If residing at present address for less than two years, complete the following:**

Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs.	Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs.
Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs.	Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent ___ No. Yrs.

Borrower		IV. EMPLOYMENT INFORMATION		Co-Borrower	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job	Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job
		Yrs. employed in this line of work/profession			Yrs. employed in this line of work/profession
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)

**If employed in current position for less than two years or if currently employed in more than one position, complete the following:**

Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)

**V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION**

Gross Monthly Income	Borrower	Co-Borrower	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income*	\$	\$	\$	Rent	\$	
Overtime				First Mortgage (P&I)		\$
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other (before completing, see the notice in "describe other income," below)				Homeowner Assn. Dues		
				Other:		
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>Total</b>	<b>\$</b>	<b>\$</b>

\* Self Employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements.

**Describe Other Income**      **Notice:** Alimony, child support, or separate maintenance income need not be revealed if the Borrower (B) or Co-Borrower (C) does not choose to have it considered for repaying this loan.

B/C	Monthly Amount
	\$

**VI. ASSETS AND LIABILITIES**

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the Co-Borrower section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed by that spouse or other person also.

Completed  Jointly  Not Jointly

Description	ASSETS	Cash or Market Value	LIABILITIES and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property.			
			LIABILITIES	Monthly Payment & Months Left to Pay	Unpaid Balance	
Cash deposit toward purchase held by:		\$				
<b>List checking and savings accounts below</b>						
Name and address of Bank, S&L, or Credit Union			Name and address of Company	\$ Payment/Months	\$	
			Acct. no.			
Acct. no.		\$	Name and address of Company	\$ Payment/Months	\$	
Name and address of Bank, S&L, or Credit Union						
			Acct. no.			
Acct. no.		\$	Name and address of Company	\$ Payment/Months	\$	
Name and address of Bank, S&L, or Credit Union						
			Acct. no.			
Acct. no.		\$	Name and address of Company	\$ Payment/Months	\$	
Stocks & Bonds (Company name/number description)		\$				
			Acct. no.			
Life insurance net cash value		\$	Name and address of Company	\$ Payment/Months	\$	
Face amount: \$						
<b>Subtotal Liquid Assets</b>		\$				
			Acct. no.			
Real estate owned (enter market value from schedule of real estate owned)		\$	Name and address of Company	\$ Payment/Months	\$	
Vested interest in retirement fund		\$				
Net worth of business(es) owned (attach financial statement)		\$				
			Acct. no.			
Automobiles owned (make and year)		\$	Alimony/Child Support/Separate Maintenance Payments Owed to:	\$		
Other Assets (itemize)		\$	Job-Related Expense (child care, union dues, etc.)	\$		
			<b>Total Monthly Payments</b>	\$		
<b>Total Assets a.</b>		\$	Net Worth (a minus b) =>	\$	<b>Total Liabilities b.</b>	\$

**Schedule of Real Estate Owned** (if additional properties are owned, use continuation sheet)

Property Address (enter S if sold, PS if pending sale or R if rental being held for income)	Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
		\$	\$	\$	\$	\$	\$
	Totals	\$	\$	\$	\$	\$	\$

**List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):**

Alternate Name	Creditor Name	Account Number

VII. DETAILS OF TRANSACTION	VIII. DECLARATIONS
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| <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>a. Purchase price</td><td style="text-align: right;">\$</td></tr> <tr><td>b. Alterations, improvements, repairs</td><td></td></tr> <tr><td>c. Land (if acquired separately)</td><td></td></tr> <tr><td>d. Refinance (incl. debts to be paid off)</td><td></td></tr> <tr><td>e. Estimated prepaid items</td><td></td></tr> <tr><td>f. Estimated closing costs</td><td></td></tr> <tr><td>g. PMI, MIP, Funding Fee</td><td></td></tr> <tr><td>h. Discount (if Borrower will pay)</td><td></td></tr> <tr><td>i. Total costs (add items a through h)</td><td></td></tr> <tr><td>j. Subordinate financing</td><td></td></tr> <tr><td>k. Borrower's closing costs paid by Seller</td><td></td></tr> <tr><td>l. Other Credits (explain)</td><td></td></tr> <tr><td>m. Loan amount (exclude PMI, MIP, Funding Fee financed)</td><td></td></tr> <tr><td>n. PMI, MIP, Funding Fee financed</td><td></td></tr> <tr><td>o. Loan amount (add m &amp; n)</td><td></td></tr> <tr><td>p. Cash from/to Borrower (subtract j, k, l &amp; o from i)</td><td></td></tr> </table> | a. Purchase price        | \$                       | b. Alterations, improvements, repairs |  | c. Land (if acquired separately) |  | d. Refinance (incl. debts to be paid off) |  | e. Estimated prepaid items |  | f. Estimated closing costs |  | g. PMI, MIP, Funding Fee |  | h. Discount (if Borrower will pay) |  | i. Total costs (add items a through h) |  | j. Subordinate financing |  | k. Borrower's closing costs paid by Seller |  | l. Other Credits (explain) |  | m. Loan amount (exclude PMI, MIP, Funding Fee financed) |  | n. PMI, MIP, Funding Fee financed |  | o. Loan amount (add m & n) |  | p. Cash from/to Borrower (subtract j, k, l & o from i) |  | <p><b>If you answer "Yes" to any questions a through i, please use continuation sheet for explanation.</b></p> <p>a. Are there any outstanding judgments against you? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>b. Have you been declared bankrupt within the past 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>d. Are you a party to a lawsuit? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?<br/> <small>(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)</small></p> <p>f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?<br/> <small>If "Yes," give details as described in the preceding question.</small></p> <p>g. Are you obligated to pay alimony, child support, or separate maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>h. Is any part of the down payment borrowed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>i. Are you a co-maker or endorser on a note? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>-----</p> <p>j. Are you a U. S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>k. Are you a permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>l. Do you intend to occupy the property as your primary residence?</b><br/> <small>If "Yes," complete question m below.</small></p> <p>m. Have you had an ownership interest in a property in the last three years?<br/>         (1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)? _____<br/>         (2) How did you hold title to the home-solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)? _____</p> | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">Borrower</th> <th colspan="2" style="text-align: center;">Co-Borrower</th> </tr> <tr> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> </tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td 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| a. Purchase price  | \$                       |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| b. Alterations, improvements, repairs  |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| c. Land (if acquired separately)   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| d. Refinance (incl. debts to be paid off)  |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| e. Estimated prepaid items   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| f. Estimated closing costs   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| g. PMI, MIP, Funding Fee   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| h. Discount (if Borrower will pay)   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| i. Total costs (add items a through h)   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| j. Subordinate financing   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| k. Borrower's closing costs paid by Seller   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| l. Other Credits (explain)   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| m. Loan amount (exclude PMI, MIP, Funding Fee financed)  |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| n. PMI, MIP, Funding Fee financed  |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| o. Loan amount (add m & n)   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| p. Cash from/to Borrower (subtract j, k, l & o from i)   |                          |                          |                                       |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| Yes  | No                       | Yes                      | No                                    |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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| <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>              |  |                                  |  |   |  |                            |  |                            |  |                          |  |                                    |  |  |  |                          |  |  |  |                            |  |   |  |                                   |  |                            |  |  |  |   |   
   
   
   
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# Borrowers' Certification and Authorization

## CERTIFICATION

The Undersigned certify the following:

1. I/We have applied for a mortgage loan through ADVANTE REAL ESTATE. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that ADVANTE REAL ESTATE reserves the right to change the mortgage loan review processes to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

## AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for a mortgage loan through ADVANTE REAL ESTATE. As part of the application process, ADVANTE REAL ESTATE and the mortgage guaranty insurer (if any), may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
2. I/We authorize you to provide to ADVANTE REAL ESTATE and to any investor to whom ADVANTE REAL ESTATE may sell my mortgage, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns.
3. ADVANTE REAL ESTATE or any investor that purchases the mortgage may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.

Borrower Signature \_\_\_\_\_

Co-Borrower Signature \_\_\_\_\_

SSN: \_\_\_\_\_ Date: \_\_\_\_\_

SSN: \_\_\_\_\_ Date: \_\_\_\_\_

## EQUAL CREDIT OPPORTUNITY ACT

APPLICATION NO:

PROPERTY ADDRESS:

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that administers compliance with this law concerning this company is the Office of the Comptroller of the Currency, Customer Assistance Group, 1301 McKinney Street, Suite 3710, Houston, Texas 77010

We are required to disclose to you that you need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so.

Having made this disclosure to you, we are permitted to inquire if any of the income shown on your application is derived from such a source and to consider the likelihood of consistent payment as we do with any income on which you are relying to qualify for the loan for which you are applying.

\_\_\_\_\_  
(Applicant) (Date)

\_\_\_\_\_  
(Applicant) (Date)

# MORTGAGE LOAN ORIGATION AGREEMENT

(Warning to Broker: The content of this form may vary depending upon the state in which it is used.)

You agree to enter into this Mortgage Loan Origination Agreement with **ADVANTE REAL ESTATE** as an independent contractor to apply for a residential mortgage loan from a participating lender with which we from time to time contract upon such terms and conditions as you may request or a lender may require. You inquired into mortgage financing with **ADVANTE REAL ESTATE** on We are licensed as a "Mortgage Broker" under

## SECTION 1. NATURE OF RELATIONSHIP.

- In connection with this mortgage loan:
- \* We are acting as an independent contractor and not as your agent.
  - \* We will enter into separate independent contractor agreements with various lenders.
  - \* While we seek to assist you in meeting your financial needs, we do not distribute the products of all lenders or investors in the market and cannot guarantee the lowest price or best terms available in the market.

## SECTION 2. OUR COMPENSATION.

- The lenders whose loan products we distribute generally provide their loan products to us at a wholesale rate.
- \* The retail price we offer you - your interest rate, total points and fees - will include our compensation.
  - \* In some cases, we may be paid all of our compensation by either you or the lender. For example, in some cases, if you would rather pay a lower interest rate, you may pay higher up-front points and fees.
  - \* Also, in some cases, if you would rather pay less up front, you may be able to pay a higher interest rate in which case we will be paid directly by the lender.

We also may be paid by the lender based on (i) the value of the Mortgage Loan or related servicing rights in the market place or (ii) other services, goods or facilities performed or provided by us to the lender.

By signing below, the mortgage loan originator and mortgage loan applicant(s) acknowledge receipt of a copy of this signed Agreement.

MORTGAGE LOAN ORIGINATOR		APPLICANT(S)	
<b>ADVANTE REAL ESTATE</b>			
Company Name		Applicant Name(s)	
<b>20432 SILVERADO AVE, SUITE 7</b>			
Address		Address	
<b>Cupertino, CA 95014</b>			
City, State, Zip		City, State, Zip	
<b>408-475-1238 / 408-519-6708</b>			
Phone/Fax		Borrower Signature	Date
Broker or Authorized Agent Signature	Date	Co-Borrower Signature	Date

***THE HOUSING FINANCIAL DISCRIMINATION ACT OF 1977***  
**FAIR LENDING NOTICE**

DATE:

COMPANY: **ADVANTE REAL ESTATE**  
**20432 SILVERADO AVE, SUITE 7**  
**Cupertino, CA 95014**

APPLICATION NO:

PROPERTY ADDRESS:

It is illegal to discriminate in the provisions of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood or geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business practice; or
2. Race, color, religion, sex, marital status, domestic partnership, national origin or ancestry.

It is illegal to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, or under what terms and conditions, to provide financial assistance.

These provisions govern financial assistance for the purpose of the purchase, construction, rehabilitation or refinancing of a one-to-four unit family residence occupied by the owner and for the purpose of the home improvement of any one-to-four unit family residence.

*If you have any questions about your rights, or if you wish to file a complaint, contact the management of this financial institution or the Department of Real Estate at one of the following locations:*

**ACKNOWLEDGMENT OF RECEIPT**

**I (we) received a copy of this notice.**

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
Date

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
Date

# Real Estate Agency Disclosure

When you begin discussions with a California Department of Real Estate License Agent regarding a real estate mortgage lending transaction, you should understand what type of agency relationship you have with that agent. A Mortgage Broker acts as the agent for the borrower in the mortgage loan transaction and may act as the limited agent of the lender for certain purposes including, but not limited to, making disclosures, ordering appraisal and credit reports, and assembling underwriting information. The brokerage has the following affirmative obligations:

**To the Borrower:**

1. Fiduciary responsibility of the utmost care, integrity, honesty, and loyalty in dealing with the borrower.

**To the Borrower and the Lender:**

1. Fiduciary responsibility of the utmost care, integrity, honesty, and loyalty in dealing with the borrower and the lender.
2. Diligent exercise of reasonable skill and care in performances of the agent's duties.
3. A duty of honesty and fair dealing and good faith.
4. A duty to disclose all facts known to the agent materially affecting the value or desirability of the property and/or credit risk of the transaction that are not known to or within the diligent attention and observation of the parties.

The above duties of the agent in this transaction do not relieve you from the responsibility to protect your own interests. You should carefully read all agreements to assure that they adequately express your understanding of this transaction. A Mortgage Broker is a person qualified to advise about real estate loan transactions. If legal or tax advice is desired, consult a professional in those fields.

**ADVANTE REAL ESTATE** is a California Department of Real Estate Licensed Brokerage, license number . The California Department of Real Estate license information phone number is 916-227-0770 and Fax number is 916-227-0777.

**ADVANTE REAL ESTATE**  
20432 SILVERADO AVE, SUITE 7  
Cupertino, CA, 95014  
(P) 408-475-1238  
(F) 408-519-6708

I/We acknowledge receipt of a copy of this agency disclosure statement.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date

# Request for Transcript of Tax Return

OMB No. 1545-1872

► **Request may be rejected if the form is incomplete or illegible.**

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> <b>First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)</b>
<b>2a</b> If a joint return, enter spouse's name shown on tax return	<b>2b</b> <b>Second social security number or individual taxpayer identification number if joint tax return</b>

**3** Current name, address (including apt., room, or suite no.), city, state, and ZIP code (See instructions)

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**4** Previous address shown on the last return filed if different from line 3 (See instructions)

**5** If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

**Caution:** *If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.*

**6 Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ► \_\_\_\_\_

**a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .

**b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days . . . . .

**c Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . .

**7 Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . . . .

**8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . . .

**Caution:** *If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.*

**9 Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** *For transcripts being sent to a third party, this form must be received within 120 days of signature date.*

<b>Sign Here</b>	Signature (see instructions)	Date	Telephone number of taxpayer on line 1a or 2a
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	