Disclosure Form Trustee Report of Sale House Bill 3082 Required Information (MUST BE TYPED)

Year:		County:	
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Grantor Last Names(s):										
Grantor First Names(s):										
Property Street Address:										
City:		Zip	Code:							
Original Trustee:		Bid Amount:								
Foreclosing Trustee Date of Appointment (if Substitute):										
Foreclosing Trustee Name:										
Foreclosing Trustee Address:										
Foreclosing Trustee City:	St	tate:	: Zip Code:							
Foreclosing Trustee Phone Number:		Fax	::							
Foreclosing Trustee E- Mail:										
Publication Date:	Time	mes Published:								
Name of Publication/Newspaper:										
City of Publication/Newspaper:										
Original Secured Lender:										
		inal Principal of Secured Debt:								
Interest Rate at Origination of Secured Debt:		Adjustable Rate Loan: Yes No								
If Adjustable, Provide Interest Rate as of Foreclosure Date:										
Total Secured Indebtedness at Foreclosure:		Number of Months Delinquent at Time of Notice of Sale:								
Foreclosing Lien Holder:										
Foreclosing Lien Holder Address:										
Foreclosing Lien Holder City:	St	tate:		Zip Code:						
Loan Type FHA VA Conv Uninsured	RD	FNM	A	FREDDIE	Other	,				
Foreclosure Sale Date: Foreclo	Foreclosure Sale Time:									
Foreclosure Sale Location:										
Purchaser's Names(s):										
Appraised Value at Origination:		Net Amount Applied to Loan:								
Date the Report of Sale Recorded:		1		1						
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