

**NATIONSTAR MORTGAGE LLC.**  
**8740 LUCENT BLVD, SUITE 600**  
**HIGHLANDS RANCH, CO 80129**

**FORECLOSURE REMITTANCE SUMMARY**  
**TEXAS VETERANS LAND BOARD**  
**EMAIL: MSTVLBLLRequests@nationstarmail.com**

Name of Servicer \_\_\_\_\_

P.O. Box Number/Street Address \_\_\_\_\_

Name of Investor Texas Veterans Land Board	Nationstar or Investor Loan #	Servicer Loan #	Loan Type(circle one) FHA VA Conv
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Name of Current Mortgagor(s) \_\_\_\_\_

Property Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Program Loan Due Date \_\_\_\_\_ Default Principal Balance (required) \_\_\_\_\_

Participant Loan Due Date \_\_\_\_\_ Default Principal Balance (required) \_\_\_\_\_

**A - LIQUIDATION PROCEEDS - \* Attach copies of NOE form or Final Claim form, Analysis & VA/FHA Check**

Amount of Funds \_\_\_\_\_ Date of Receipt \_\_\_\_\_

Funds Received From: \_\_\_\_\_

Date Interest paid through: \_\_\_\_\_ If interest not paid thru sale date, failure to provide explanation and proof for curtailment will result in penalty \_\_\_\_\_

Are Additional funds expected? \_\_\_\_\_ NO \_\_\_\_\_ YES If yes, date final claim filed or will be filed: \_\_\_\_\_

**B - ATTORNEY/TRUSTEE FEES, LIQUIDATION AND ACQUISITION EXPENSES - Attach requested copies**

Attorney/Trustee Fee (for liquidation - attach statement)	\$ _____
Attorney Fee (for possessory action, etc. - attach itemization)	\$ _____
Statutory Disbursements (filing fees, publication charges, etc. - attach itemization)	\$ _____
Property Taxes, Assessments, etc. (attach itemization)	\$ _____
Hazard Insurance Premium	\$ _____
Flood Insurance Premium	\$ _____
Mortgage Insurance Premium	\$ _____
Property Maintenance (winterize, mow, etc. - attach itemization)	\$ _____
Property Preservation (board, secure, change locks, etc. - attach itemization)	\$ _____
Other (attach itemization) _____	\$ _____
<b>Total</b>	<b>\$ _____</b>

**C - CREDITS**

Escrow Balance (on hand as of Mortgage Loan Due Date)	\$ _____
Insurance Premium Refunds	\$ _____
Rental Receipts	\$ _____
<b>Total</b>	<b>\$ _____</b>

**D - NET ADVANCES**

Total Amount Advanced (B minus C) \$ \_\_\_\_\_

**E - REMITTANCE TO VETERANS' LAND BOARD**

Date of Remittance to VLB: \_\_\_\_\_

Amount of Liquidation Proceeds Remitted \$ \_\_\_\_\_  
 (A minus D, multiplied by the VLB Percentage% below)

VLB PROGRAM PERCENTAGE % \_\_\_\_\_

(VLB default balance divided by total of both default balances = VLB Program Percentage %)

Name of Processor \_\_\_\_\_ Title \_\_\_\_\_

Signature of Processor \_\_\_\_\_ Phone Number \_\_\_\_\_ Date \_\_\_\_\_