

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:				State:			Zip Code:
Foreclosing Trustee Phone Number:				Fax:			
Foreclosing Trustee E- Mail:							
Publication Date:					Times Published:		
Name of Publication/Newspaper:							
City of Publication/Newspaper:							
Original Secured Lender:							
Date of Original Deed of Trust:				Original Principal Amount of Secured Debt:			
Interest Rate at Origination of Secured Debt:				Adjustable Rate Loan: <input type="checkbox"/> Yes <input type="checkbox"/> 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:				State:			Zip Code:
Loan Type	FHA <input type="checkbox"/>	VA <input type="checkbox"/>	Conv <input type="checkbox"/>	Uninsured <input type="checkbox"/>	RD <input type="checkbox"/>	FNMA <input type="checkbox"/>	FREDDIE <input type="checkbox"/> Other <input type="checkbox"/>
Foreclosure Sale Date:					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:							