

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:									