

**BENEFICIARY'S DECLARATION OF ADDITIONAL FUNDS RECEIVED**

If a beneficiary of a deed of trust receives any private mortgage insurance payments within three months after the date of a trustee sale foreclosing the deed of trust, the beneficiary must report the amount of the insurance payment(s) received by completing this declaration and submitting it to the County Recorder in the county where the property is located within four months after the date of sale pursuant to A.R.S. § 11-1133(B).

1. Assessor's parcel identification number(s):

Primary parcel: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Book Map Parcel Split

Did this transaction include any parcels that are being split/divided?

Check one: Yes No

How many parcels, other than the primary parcel, are included in this transaction? \_\_\_\_\_

Please list the additional parcels below (attach list if necessary):

(1) \_\_\_\_\_ (2) \_\_\_\_\_

(3) \_\_\_\_\_ (4) \_\_\_\_\_

2. Name and address of Beneficiary submitting the declaration:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Date of Trustee's sale: \_\_\_\_\_  
Month / Day / Year

4. Highest bid received by Trustee at Trustee's sale:

	\$		00
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5. Recording number of Trustee's deed on sale:

\_\_\_\_\_

6. Private Mortgage Insurance Payment received within three months after the date of the Trustee's sale: (Amount received in addition to proceeds of the sale).

	\$		00
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THE FOREGOING INFORMATION IS A TRUE AND CORRECT STATEMENT OF THE FACTS PERTAINING TO THE TRANSFER OF THE ABOVE DESCRIBED PROPERTY.

\_\_\_\_\_  
Signature of Beneficiary / Agent submitting the Declaration

\_\_\_\_\_  
Print name of Beneficiary / Agent submitting the Declaration

Date \_\_\_\_\_