## Exhibit A Program Loan Confirmation

Agency:	Last Approved Stage:	
Program:	Working (The Next S	
LHC Loan Number:	S	Status:
SMC Loan Number:		Time:
Originator:		Date:
Loan Officer:	Closed Delivered	
Servicer:	Final Purchase	Date:
Loan Amount:	Interest	Rate:
Assistance Amount:	Loan	Type:
Assistance Percentage:		Term:
Acquisition Cost:	Ge	ender:
Primary Borrower:		Age:
Co- Borrower(s):	Marital S	Status:
	Total HH	I Size:
	In	come:
	FICO	Score:
Property Address:	Census	Tract:
City:	Building	Type:
County:	Cat	egory:
State:	Year	Built:
Zip:	Number of	Units:
Extension Guidelines:	The Lender can request a one-time 30 day extension before the 45 day lock period expires. The non-refundable extension fee is \$375. Failure to submit the request for extension before the initial rate lock expiration will result in the cancellation of the reservation.	
Stage	Approved Date: Approve	ed By:

Stage Reservation: Lender Certification: Compliance Approval:

Delivered to Trustee:

## For additional loan details, you can view your loan on line.

LHC SINGLE FAMILY REQUIRED DOCUMENT AS OF 03/07/16