

Supplemental Claim Form**I. BORROWER INFORMATION**

1. Social Security #

2. Name (Last, First, MI)

II. LOAN INFORMATION

3. Loan Type

4. Loan ID

5. Int Rate/Type

III. CLAIM PAYMENT INFORMATION

6. \$ Prin Paid

7. \$ Int Paid

8. # Days Int Paid

9. Claim Pmt Dt

10. Int-Paid-Through Dt

IV. REQUESTED SUPPLEMENTAL CLAIM AMOUNT

11. \$ Prin Increase \$ _____

12. \$ Int Increase + \$ _____

13. \$ Total Increase = \$ _____

V. REASON FOR SUPPLEMENTAL CLAIM REQUEST*Check the appropriate supplemental claim reason and provide supporting documentation in accordance with the instructions.***A. Due Diligence Error Incorrectly Cited**14. DL (Letters) 1___ 2___ 3___ 4___ 5___15. LD (Final Demand)16. DK (Phone Skip)17. DA (Phone) 1___ 2___ 3___ 4___18. DP (No DAAR)19. DT (Address Skip)20. DC (Late DAAR)21. DO (Other)**B. Error in Interest Calculation**22. IM _____ (Correct number of days)23. IN _____ (Date returned claim received) _____ (Date claim resubmitted)24. IP _____ (Correct Int-Paid-Through Dt)**C. Miscellaneous**25. MF26. MT27. MO**D. Comments**

VI. LENDER/SERVICER INFORMATION AND CERTIFICATION

28. Lender ID

29. Servicer ID

30. Lender/Servicer Name

31. Lender/Servicer Address

32. Prepared By

33. Preparer's # ()

BY SUBMITTING THIS SUPPLEMENTAL CLAIM TO THE GUARANTOR FOR REIMBURSEMENT, THE LENDER/HOLDER CERTIFIES, TO THE BEST OF ITS KNOWLEDGE, THAT THE INFORMATION IN THE SUPPLEMENTAL CLAIM IS TRUE AND ACCURATE. SUBMISSION ALSO MAKES THIS SUPPLEMENTAL CLAIM A PART OF THE TOTAL CLAIM FILED ON THE BORROWER'S LOAN(S) NAMED IN SECTION II. AS SUCH, THE LENDER/HOLDER AGREES TO INCLUDE IN ANY REPURCHASE OR REFUND OF REINSURANCE ON THE INITIAL CLAIM THE AMOUNT PAID ON THIS SUPPLEMENTAL CLAIM. LIKEWISE, ALL RIGHTS, TITLE, AND INTEREST IN THE LOAN(S) LISTED IN SECTION II ARE RETAINED BY THE GUARANTOR OR ITS SUCCESSOR APPLICABLE TO EACH LOAN.

Instructions for Completing Supplemental Claim Form

This form is to be used to submit a request for increase in the amount of claim payment to the guarantor. When completing this form, print or type all information and complete all applicable fields. Use the chart in the *Common Manual* titled "Information to be Provided on the Supplemental Claim Form" to identify which fields are required and provide the requested information; for fields where the information is not available (or applicable), complete alpha fields with "NA" and fill numeric/date fields with zeroes. All date fields must be completed with numerics in MM/DD/CCYY format. No supplemental claim may be submitted for an amount less than fifty dollars (\$50.00). If the number of claimed loans requires more space than is provided, attach a separate Supplemental Claim Form with only Sections I and II completed.

I. BORROWER INFORMATION:

1. **Social Security #:** Provide the borrower's social security number (do not submit a Supplemental Claim Form without a social security number).
2. **Name (Last, First, MI):** Provide the borrower's last name, first name, and middle initial.

II. LOAN INFORMATION:

3. **Loan Type:** For each loan listed, provide the loan type using one of the following codes: SF = Subsidized Stafford (including non-subsidized disbursed prior to 10/92); SU = Unsubsidized Stafford; PL = PLUS; GB = Graduate PLUS; SL = SLS; CL = Consolidation. A separate Supplemental Claim Form must be submitted for each loan type. *Note: Subsidized and unsubsidized Stafford loans that have been combined into one repayment schedule may be combined into one supplemental claim, subject to guarantor requirement.*
4. **Loan ID:** For each loan listed, provide the loan identifier code, file number, guarantee date, or guarantee amount, as required by the guarantor of the loan(s).
5. **Int Rate/Type:** For each loan listed, provide the current interest rate and indicate the type of interest rate by entering the appropriate code: F = Fixed rate; V = Variable rate; 8 = Adjustable rate (8-10%).

III. CLAIM PAYMENT INFORMATION:

6. **\$ Prin Paid:** Provide the amount of principal paid by the guarantor.
7. **\$ Int Paid:** Provide the amount of interest paid by the guarantor.
8. **# Days Int Paid:** Provide the number of days of interest paid by the guarantor (i.e., calculate the number of days between item 10 and the last date through which the guarantor paid accrued interest).
9. **Claim Pmt Dt:** Provide the date the claim payment was received.
10. **Int-Paid-Through Dt:** Provide the date submitted on the claim form through which interest was last paid.

IV. REQUESTED SUPPLEMENTAL CLAIM AMOUNT:

11. **\$ Prin Increase:** Provide the amount of principal that was underpaid.
12. **\$ Int Increase:** Provide the amount of interest that was underpaid.
13. **\$ Total Increase:** Provide the total value of the supplemental claim (the sum of item 11 and 12).

V. REASON FOR SUPPLEMENTAL CLAIM REQUEST:

A. Due Diligence Error Incorrectly Cited

14. **DL:** An interest penalty was incorrectly cited for missing letters. *Supporting documentation: Applicable servicing and/or payment history.*
15. **LD:** An interest penalty was incorrectly cited for a missing final demand letter. *Supporting documentation: Applicable servicing and/or payment history.*
16. **DK:** An interest penalty was incorrectly cited for untimely and/or omitted telephone skip tracing activities. *Supporting documentation: Applicable servicing and/or payment history.*
17. **DA:** An interest penalty was incorrectly cited for an untimely and/or omitted diligent effort to contact the borrower by telephone. *Supporting documentation: Applicable servicing and/or payment history.*
18. **DP:** An interest penalty was incorrectly cited for a missing default aversion assistance request. *Supporting documentation: Copy of a default aversion assistance request acknowledgment or other documentation acceptable to the guarantor (e.g., signed hard-copy list of borrowers from a tape).*
19. **DT:** An interest penalty was incorrectly cited for untimely and/or omitted address skip tracing activities. *Supporting documentation: Applicable servicing and/or payment history.*
20. **DC:** An interest penalty was incorrectly cited for a late default aversion assistance request. *Supporting documentation: Copy of a default aversion assistance request acknowledgment or other documentation acceptable to the guarantor (e.g., a signed hard-copy list of borrowers from a tape).*
21. **DO:** Other due diligence errors were incorrectly cited. *Supporting documentation: Applicable servicing and/or payment history or other loan document.*

B. Error in Interest Calculation

22. **IM:** The number of days of interest paid was calculated incorrectly by the guarantor. Provide the correct number of days of interest that should have been paid on the claim.
23. **IN:** The return time frame was calculated incorrectly. Provide the date the lender received the returned claim package, and the resubmission date for the return time frame in dispute. Provide supporting documentation.
24. **IP:** An incorrect interest-paid-through date was used to calculate the claim payment amount. Provide the correct interest-paid-through date.

C. Miscellaneous

25. **MF:** Incorrect information was provided on the original claim form. *Supporting documentation: Applicable servicing and/or payment history or other loan document.*
26. **MT:** A timely filing violation is being appealed. *Supporting documentation: Applicable servicing and/or payment history.*
27. **MO:** Other miscellaneous supplemental request reasons. *Supporting documentation: Applicable servicing and/or payment history or other loan document.*

D. Comments: Provide explanation of request as necessary.

VI. LENDER/SERVICER INFORMATION AND CERTIFICATION:

28. **Lender ID:** Provide the six-digit Department of Education lender code and, as applicable, the four-digit non-Department of Education suffix of the lender or the current holder.
29. **Servicer ID:** If the account is being serviced, provide the six-digit Department of Education servicer code.
30. **Lender/Servicer Name:** If the account is being serviced, provide the servicer's name; if there is no servicer, provide the lender's name.
31. **Lender/Servicer Address:** If the account is being serviced, provide the servicer's address; if there is no servicer, provide the lender's address.
32. **Prepared By:** Provide the name of the person or unit responsible for answering questions about information provided on this form.
33. **Preparer's #:** Provide the phone number (including area code) where the preparer may be reached.