BANK NAME			
OCC CHARTER #	TOTAL NUMBER OF DECISION CENTERS		
PERSON RESPONSIBLE FOR COMPLETING THIS FORM AND PHONE NO.			

COMPTROLLER OF THE CURRENCY
MONTHLY
HOME LOAN ACTIVITY FORMAT

DECISION CENTER NAME	NUMBER
ADDRESS	PHONE NO.
PRINCIPAL SERVICE AREA (e.g. State, SMSA, County, City or Part Thereof)	

YEAR	HOME LOAN APPLICATIONS											
	PURCHASE				CONSTRUCTION—PERMANENT				REFINANCE			
MONTH	No. Received	No. Closed	No. Rejected	No. Withdrawn	No. Received	No. Closed	No. Rejected	No. Withdrawn	No. Received	No. Closed	No. Rejected	No. Withdrawn
JANUARY												
FEBRUARY												
MARCH												
APRIL												
MAY												
JUNE												
JULY												
AUGUST												
SEPTEMBER												
OCTOBER												
NOVEMBER												
DECEMBER												
TOTAL												