MEDICIAL BURRAY	JOF ECONOMIC	RESEARCE	MORI	GAGE IOA	N FXPFR'C'.		(C.B.)			
Type of property (check one)  1  One-family, no business 2  Two-family, no business 3  Three-family, no business 4  Four-family, no business 5  Business and 1- to 4-family 6  Apartments, no business			B. Location of property: State Washington County Pierce  D. Type of loan at time of making (check one)  1				E. C	E. Original schedule of payments (check)  Prin. Int.  1 Monthly E X 2  2 Quarterly 3 Semi-annual 4 Annual 5 None		
		an or sales contra			interest7			d		
Month and Your of Modification (1)	Unpaid Balance at Time of Modification (2)			of Principal	Extension of Contract Term (in yrs.)	Change in Con- tract Rate of Interest	Changes in Loan Type (see D above)	New Appraisal	Unpaid Balance after Modifications	
est Jan, 4, 28 cond	* 2413.70		\$	\$	Paymant to reduced to	to6%  to%	(8)	\$ Same	\$2413	
	3) Transferred 3) Title acquire	to HOLC (year)	); by foreclo	Loan sold or  Stare ; by vol	Paid off (year)  assigned (year)  untary deed  below this line)		fill in Schedu of	this card)	se side	
31 30 00 34 30 00	62 63 64 65	94 97 98 99 70 7	73 73 74 78 7			S V V 7 0 2 33 34 3	2 7 4 2 1 0 0 41 42 43 44	2600		
		30 41 42 43	44 45 46 47 48	40 50 51 52 8	3 54 56 57 AS	A0 40 40 40	4 68 66 67 68 70 70 70 70 70 70 70 70 70 70 70 70 70			