

**Form 1062**  
**Sight Draft**

TO:

Name of Servicer or depository

Seller/Servicer number

Street address

City

State, Zip Code

DATE:

TIME:

Pay to the order of the Federal Home Loan Mortgage Corporation ("FHLMC") the sum of \$ \_\_\_\_\_ or, if no sum certain is specified, the total balance held in account no. \_\_\_\_\_. Pay by Fed wire to credit of the account of the FHLMC at Chase Manhattan Bank, New York, New York, ABA No. 021-0000-21, account no. 910-2-447498; reference sight draft and Seller/Servicer no. \_\_\_\_\_.

Authorized officer, employee, representative, agent or attorney of FHLMC

(Signature)