

I am requesting and would like to receive monthly Periodic Statements on the mortgage account below:

Name:	Street Address:	City, State, ZIP Code:
Mortgage Account Number:		
Daytime Phone Number:	Evening Phone Number:	

I am revoking my previous request to stop receiving statements (my opt-out). I understand that I have the option to discontinue receiving monthly periodic statements at any time upon written request to SLS.

Borrower Signature _____ Date _____

Co-Borrower Signature _____ Date _____

If you wish to receive monthly periodic statements related to the above-referenced account, please complete this form and return it to SLS by fax, mail, or email:

SLS Fax Number: 1-720-241-7218
 SLS Mailing Address: Specialized Loan Servicing LLC
 P.O. Box 636005
 Littleton, CO 80163-6005
 SLS Email Address: customer.support@sls.net