

CONTACT INFORMATION FORM

*The information requested by this Form is required to determine the types of Assets a Prospective Bidder is interested in and to facilitate communication with the Prospective Bidder. The information required by this Form may be submitted in a separate typed or printed document, including by electronic mail. **Please TYPE or print clearly.***

1. Name of Prospective Bidder: _____
(The name of the person seeking to qualify as a bidder)

2. Preferred Mailing Address: _____

3. Physical Address (if different): _____

4. Name and address of Corporate Parent or Guarantor, if any, of Prospective Bidder. _____

5. Name and address of General Partner(s) (if Prospective Bidder is a partnership) or Manager (if Prospective Bidder is a limited liability company). _____

6. Compliance Contact (The individual to be contacted to request updates of the "PEC" or to discuss other questions regarding qualification), his/her title, address (if different from above) and phone, fax & e-mail. _____

7. Trader (The individual, *if different from Compliance Contact*, who will be authorized to submit bids), his/her address (if different than above) and his/her phone, fax and e-mail address. _____

8. Please circle (or otherwise indicate) the type of product for which you (or your organization) are interested in bidding and qualified to bid on.

Agency Securities Asset Backed Securities CMO's /REMICs/CDO's

Corporate Bonds Corporate Notes Credit Card Receivables

High Yield Bonds Interest-Only (IO) Strips Interest Rate Swaps

Limited Partnerships Loan Production Platform Municipals Securities

Residuals Servicing Platform Principal-Only (PO) Strips

Servicing Rights Common Stocks Preferred Stock

U S Treasuries Shared National Credits Other Derivative Products

Structured Transactions (in loans, notes, collateral property, etc.)

OTHER: _____

9. Please be advised that the FDIC welcomes and strongly encourages participation of MWO Investors/Entities and you have the opportunity to disclose such information about the Investor entity so that we may examine the level of MWO Investor interest in future structured sales opportunities and identify additional Investor outreach activities to support diversity of participation. Therefore, we would appreciate your assistance in completing this survey and checking all appropriate responses. Please understand that the disclosure of this information is for FDIC informational purposes only.

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| Investor/Entity Name: | | Tax ID: | |
| City: | | State: | |
| Contact Person and Title: | | E-mail Address: | |
| The Investor/Entity * is... | | Minority Owned: | Women-owned: |
| Race * (Choose all appropriate responses) | American Indian or Alaska Native Female: American Indian or Alaska Native Male: Asian Female: Asian Male: Black or African American Female: Black or African American Male: Native Hawaiian or Other Pacific Islander Female: Native Hawaiian or Other Pacific Islander Male: White Female: White Male: | | |
| | Hispanic or Latino Female: Hispanic or Latino Male: Not Hispanic or Latino Male: Not Hispanic or Latino Female: | | |
| <small>* MWO Investors/Entities are at least 51% owned and controlled, through day-to-day management by persons of one or more of the following groups: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, Hispanic or Latino, and/or Women</small> | | | |

The foregoing information was submitted by _____ (Type or Print name of individual completing this Form) as of _____, 20__ (date on which Form is provided).