FEDERAL HOME LOAN BANK OF INDIANAPOLIS
MORTGAGE PURCHASE PROGRAM

ESCROW CUSTODIAL ACCOUNT AGREEMENT

_____
Name of Escrow Custodian

_____
Street Address

_____
City   State   ZIP Code

You are hereby authorized and requested to establish a custodial account to be specifically designated "Trustee of Escrow Custodial Account for various Mortgagors related to Federal Home Loan Bank of Indianapolis ("FHLBI") Whole Loans." All deposits made in such account shall be subject to withdrawal therefrom by the Servicer named below and shall be subject to withdrawal therefrom by FHLBI. No agent of the Servicer or any other party shall be authorized to withdraw funds from the account. You are also authorized to pay to FHLBI at any time upon its written demand, which need not name a specific amount, the entire amount in such account at the time of such demand.

Please execute this certificate below, acknowledging the existence of such account, so that we may present this certificate signed by you to FHLBI or its agent.

_____
Name of Servicer

_____
Telephone Number

_____
Signature of Servicer's Authorized Representative

_____
Typed Name and Title of Servicer's Authorized Representative

_____
Date

The undersigned institution certifies to FHLBI that the account identified above is in existence in this institution under account number _____ The undersigned certifies that such account meets all applicable regulations governing the undersigned and is subject to withdrawal, in whole or in part, by FHLBI upon its written request without presentation of a passbook or being subject to any similar requirement. The undersigned agrees to honor any request for withdrawal made by FHLBI, subject only to the notice requirements contained in applicable regulations or the undersigned's charter, and, furthermore, to withhold payment of sums to the aforesaid institution if requested to do so by FHLBI. Such account is insured by the Federal Deposit Insurance Corporation.

_____
Name of Depository

_____
Signature of Depository's Authorized Representative

_____
Typed Name and Title of Depository's Authorized Representative

_____
Date