

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

REPORTING ALERT

Number: _____

Date: _____

EFFECTIVE DATE	FORM NUMBER	TITLE	RMS CONTROL SYMBOL
-------------------	----------------	-------	-----------------------

The use of all expired or cancelled reporting forms are to be discontinued

___ Upon receipt of this notification

___ On date of expiration (shown above)

except where data gathered does not extend past the cancelled or expired date.

HUD-131.1 (3-73)