**Exhibit 3**

**FANNIE MAE NATIVE AMERICAN HOUSING ADDENDUM TO FIXED-RATE NOTE**

THIS FANNIE MAE NATIVE AMERICAN HOUSING ADDENDUM TO FIXED-RATE NOTE (the “**Addendum**”) is made this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_, and is incorporated into amends and supplements the Note of the same date made by the undersigned (**“Borrower”**) to the Lender or Note Holder as defined in the Note.

The Note is secured by a mortgage, deed of trust, or security deed and a Fannie Mae Rider to Residential Lease of Tribal Owned Land (together, the “**Security Instrument**”) given by Borrower to secure the Note.

The property subject to the Security Instrument (the “**Property**”) is within the jurisdiction of the [Name of Tribe] (the “**Tribe**”).

**ADDITIONAL COVENANT.** Notwithstanding anything to the contrary contained in the Note, and in addition to the covenants and agreements made in the Note, Borrower and Lender further agree as follows:

**GOVERNING LAW**

The Note and this Addendum is governed by federal law and the laws of the Tribe (“Tribal Law”), except to the extent that Tribal Law is silent or nonexistent, in which case the laws of the state in which the Property is located apply. Borrower consents to the personal jurisdiction of the Tribe’s Tribal Court and any other court of competent jurisdiction designated by the Tribe for all claims and demands related to or arising out of the Note and this Addendum.

BY SIGNING BELOW, Borrower accepts and agrees to the terms and covenants contained in this Addendum.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (SEAL)

-Borrower

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (SEAL)

-Borrower

**CERTIFICATE OF APPROVAL**

The foregoing Note and this Addendum are hereby approved on behalf of the Secretary of the Interior. Approval of the Note and the Addendum shall not be construed to be an agreement or assurance that the Property subject to the Security Instrument will remain in a trust or restricted status during the period of the Note and Security Instrument.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Representative

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