Refer to this CENSUS FILE NUMBER in any correspondence pertaining to this report



B. ADDITIONAL LOCATIONS OF OPERATIONS

List of Establishments

Column (a) - List separately any establishments of your company and its subsidiaries that were not included on the PRE-IDENTIFIED LOCATIONS OF OPERATIONS but were in operation and engaged in the industry printed in the mailing address section on the first page of the consolidated report form. If your company operates at locations for which you have received separate report forms, do not list them, instead complete those forms. For acquired establishments that you list, complete column (c2).

Column (b) - Report number of enviloyees payroll for both paid and leased employees for each establishment, including part-year operations.

Column (c1) - Enter the dode from the MAJOF ACTIVITY CODES list that less describes the activity of each establishment and specify the principal products or services.

Column (c2) - Complete for acquired establishments.

MAJOR ACTIVITY CODES FOR COLUMN (c1)

- 01 Commercial bank national charter
- 02 Commercial bank state charter
- 03 Depository trust company national charter
- 04 Depository trust company state of
- 05 Federal savings in stitutio
- 01 Nonfeder I vavings institution
- ken edial toan society or mutual blin accepting deposits

Date acquired

Brandh of fore gn ban

IMPORTANT - DO NOT DUPLICATE ESTABLISHMENTS PRELISTED IN TALL. 2002 Employment and Company Establishments and Subsidiaries (Employer Major Activity in 2002 (Enter the code from the MAJOR ACTIVITY CODES list and specify the Payroll (Report the number of Identification Number (EIN), establishment name, your employees and payroll for each store or plant number, if any, address of physical location, establishment, including partprincipal products or services.) including ZIP Code) year operations.) (a) (b) (c1)Line No. EIN 2002 Number of Paid employees employees for pay period Code Specify 7 Name including March 12 First \$ Mil. Thou. quarter Former Owner or Operator Secondary name Store or plant No. payroll (Jan.-Mar. (c2)Name of former owner or operator Annual Physical location (Number and street) payroll 2002 Number of Leased employees Mailing address (No. and street, P.O. box, etc.) employees City, town, village, etc. State **ZIP Code** for pay period including City, town, village, etc. State ZIP Code March 12 First Month Day Year \$ Mil. Thou. Date establishment quarter opened or is expected to payroll . (Jan.-Mar. Month Year open

Annual payroll

Form NC-99655

B. ADDITIONAL LOCATIONS OF OPERATIONS - Continued										
(a) Company Establishments a	(b) 2002 Employment and Payroll			(c1) Major Activity in 2002						
Line No. EIN				2002			•			
			Number of employees	Paid employees						
			for pay			Code Specify 7				
Name			period including				, ,			
			March 12							
_			First	\$ Mil.	Thou.					
Secondary name Store or plant No.		quarter payroll			Former Owner or Operator					
			(JanMar.)				(c2)			
			Annual	Name of former owner or operator						
Physical location (Number and street)			payroll	2002						
	Number of			10.00						
0			employees	Leased e	mployees	Mailing address (No. and street, P.O. box, etc.)				
City, town, village, etc. State ZIP		^o Code	for pay period	od						
			including			City, town, village, etc.	Ctata	ZID	Code	
Month	Day	Year	March 12 First	\$ Mil.	Thou.	City, town, village, etc.	State	ZIF	Code	
Date establishment	Day	Teal	quarter	φ IVIII.	mou.					
opened or is expected to open			payroll <i>(JanMar.)</i>				Mc	onth	Year	
орон	Annual			World Tour						
	payroll		1 1	Date acquired						
Line No. EIN	2002									
			Number of employees	Number of						
-			for pay		2.07003	Code	ecify z	ocify =		
Name			period including			Code or	cerry y			
			March 12							
	First \$ Mil. Thou.									
Secondary name Store or plant No.			quarter payroll		i i	Former Owner or Operator (c2)				
			(JanMar.)							
	Annual			Name of former owner	former owner or operator					
Physical location (Number and street)			payroll							
			Number of	of 2002						
			employees	Leased e	mployees	Mailing address (No. and street, P.O. box, etc.)				
City, town, village, etc. State ZIP Code			for pay period							
			including			City, town, village, etc.	Ctata	ZID	Code	
Month	Davi	Vacu	March 12 First	ф N/I:I	Thou	City, town, village, etc.	State	ZIF	Code	
Date establishment Month	Day	Year	quarter	\$ Mil.	Thou.					
opened or is expected to open	l		payroll (JanMar.)				Mc	onth	Year	
орен			Annual				IVIC	711611		
	payroll			Date acquired						
Line No. EIN		2002								
			Number of Paid employees							
			for pay	pay		Code Specify				
Name			period including							
			March 12							
			First	\$ Mil.	Thou.					
Secondary name	Stor	re or plant No.	quarter payroll			Former Owi	ner or C)pera	tor	
			(JanMar.)				(c2)			
			Annual			Name of former owner	or ope	rator		
Physical location (Number and street	payroll									
			Number of							
<u> </u>			employees			Mailing address (No. and street, P.O. box, etc.)				
City, town, village, etc. State ZIP Code			for pay period	d ding						
			including			City, town, village, etc. State ZIP Code				
1			March 12	A. P. 4 77	T .	City, town, village, etc.	State	ZIP	Code	
Date establishment	Day	Year	First quarter	\$ Mil.	Thou.					
opened or is expected to			payroll				N 4	 	Vaar	
open			(JánMar.)				IVIC	onth	Year	
			Annual							