

**TRANSFER AGENT REGISTRATION AND AMENDMENT FORM**  
**FORM TA-1**

Agency	OMB No.	Expiration Date
FDIC	3064-0026	07-31-01
FRB	7100-0099	02-28-01
OCC	1557-0124	07-31-01

Please print or type all responses. Complete all items for both registrations and amendments. Read all instructions before completing the form.  
Detailed guidance for each item on Form TA-1 appears in Part II (Special Instructions) of the Instructions for Form TA-1.

1. APPROPRIATE REGULATORY AGENCY (*Check One*) (See General Instruction D)

- Comptroller of the Currency
- Federal Deposit Insurance Corporation
- Board of Governors of the Federal Reserve System

2. FILING STATUS OF THIS FORM (*Check One*)

- Registration
- Amendment to Registration

3. FULL NAME OF REGISTRANT ORGANIZATION

.....  
Previous Name of Registrant Organization (If Being Amended for Name Change):

4. FINANCIAL INDUSTRY NUMBER STANDARD (FINS) NUMBER

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5. MAIN OFFICE LOCATION OF REGISTRANT

Number and Street	City	State	9-Digit Zip Code
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6. MAILING ADDRESS (If Different from Response to Question 5)

Number and Street	City	State	9-Digit Zip Code
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7. TELEPHONE NUMBER

Area Code	Number
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8. PRINCIPAL LOCATION OF THE REGISTRANT WHERE TRANSFER AGENT PROCESSING ACTIVITIES ARE CONDUCTED. (If Different from Response to Question 5)

Number and Street	City	State	9-Digit Zip Code
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9. LIST ALL OTHER LOCATIONS OF THE REGISTRANT, OTHER THAN THAT GIVEN IN QUESTIONS 5 AND 8 ABOVE, WHERE TRANSFER AGENT PROCESSING ACTIVITIES ARE CONDUCTED.

Number and Street	City	State	9-Digit Zip Code
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10. DOES REGISTRANT ACT, OR WILL IT ACT, AS A TRANSFER AGENT SOLELY FOR ITS OWN SECURITIES AND/OR SECURITIES OF AN AFFILIATE(S)?

Yes  
 No

11. HAS THE REGISTRANT CONTRACTED TO HAVE AN OUTSIDE ORGANIZATION PERFORM TRANSFER AGENT FUNCTIONS IN THE REGISTRANT'S NAME? ("*PRIVATE LABEL*" Servicing)

Name(s) of Private Label Transfer Agent(s)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARA-Assigned Registered Transfer Agent Number

8		-					
8		-					
8		-					

(ARA = "Appropriate Regulatory Agency")

12. DOES THE REGISTRANT PERFORM ANY *PRIVATE LABEL* TRANSFER AGENT SERVICES FOR ANOTHER REGISTERED TRANSFER AGENT?

Name(s) of Named Transfer Agent(s)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARA-Assigned Registered Transfer Agent Number

8		-					
8		-					
8		-					
8		-					
8		-					

(ARA = "Appropriate Regulatory Agency")

13. EXECUTION: The Registrant submitting this Form, and the person executing it, hereby represent that all the information contained herein is true, correct, and complete.

ATTENTION: Intentional misstatements or omissions of fact constitute Federal criminal violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

14. FULL NAME AND TITLE OF OFFICIAL RESPONSIBLE FOR FORM (*Print or Type*)

[First Name] [Full Middle Name] [Last Name] [Title]

15. SIGNATURE OF OFFICIAL RESPONSIBLE FOR FORM

16. DATE