

Report of Condition at Commencement of Liquidation

Name of liquidating bank:

Charter number:

Located at (*city, county, state, ZIP Code*):

The business of which was acquired by (*purchasing bank, if applicable*):

Liquidation effective on (*date of liquidation*):

I, the undersigned, being the liquidating agent (*correspondent for the liquidating committee*), certify the attached report of assets and liabilities (or call report) to be a true statement, to the best of my knowledge and belief.

(Liquidating Agent) (*Correspondent for Committee*)

(Committee Member)

(Committee Member)

(Committee Member)

(Committee Member)

_____ (Date Signed)

[A majority of the liquidating committee must sign this document.]

Attachment: Call Report (*or Report of Assets and Liabilities*)