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)