Liquidation—Final Report

Federal Branch, Limited Federal Branch, Federal Agency Identifying Information

OCC License No	Date Liq Date Liq	uidation Starteduidation Completed
Name Address(office add	(exact corporate title of bank) (office address, street, city, state, ZIP Code, country)	
Liquidating Agent/Correspond	lent Identifying Information	1
Name		
Address		
City	State	ZIP Code
Phone No.	Fax No	E-Mail
[If applicable] The liquid liabilities by (<i>name the</i>	idation occurred because of acquiring institution).	an acquisition of the assets and
the attached* report of my/our knowledge and	assets and liabilities to be a	t/liquidating committee), certify true statement, to the best of Capital Equivalency Deposit (CED) bank).
Executed this	of,	
	(Correspondent committee, every member	

^{*}NOTE: The referenced report of assets and liabilities must be certified by a CPA and should reflect zero balances with the exception of the CED account.