

DEPARTMENT OF THE TREASURY**Office of the Comptroller of the Currency****FEDERAL RESERVE SYSTEM****FEDERAL DEPOSIT INSURANCE CORPORATION****Proposed Collection; Comment Request**

AGENCIES: Office of the Comptroller of the Currency, Treasury; Board of Governors of the Federal Reserve System; and Federal Deposit Insurance Corporation.

ACTION: Notice and request for comments.

SUMMARY: The Office of the Comptroller of the Currency (OCC), the Board of Governors of the Federal Reserve System (Board), and the Federal Deposit Insurance Corporation (FDIC) (collectively, the Agencies), as part of their continuing efforts to reduce paperwork and respondent burden, invite the general public and other Federal agencies to comment on proposed information collections, as required by the Paperwork Reduction Act of 1995. Currently, the Agencies are soliciting comments concerning an information collection titled (MA)—Financial Institutions Securities Qualifications Forms.

DATES: Written comments should be submitted by February 28, 1997.

ADDRESSES: Direct all written comments to:

OCC: Communications Division, Attention: 1557-FISQ, Third Floor, Office of the Comptroller of the Currency, 250 E Street, SW, Washington, DC 20219. In addition, comments may be sent by facsimile transmission to (202) 874-5274, or by electronic mail to REGS.COMMENTS@OCC.TREAS.GOV.

Board: Mr. William W. Wiles, Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, N.W., Washington, D.C. 20551, or delivered to the Board's mail room between 8:45 and 5:15 p.m., and to the security control room outside of those hours. Both the mail room and the security control room are accessible from the courtyard entrance on 20th Street between Constitution Avenue and C Street, N.W. Comments received may be inspected in room M-P-500 between 9:00 a.m. and 5:00 p.m., except as

provided in section 261.8 of the Board's Rules Regarding Availability of Information, 12 CFR 261.8(a).

FDIC: Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, D.C. 20429. Comments may be hand-delivered to room F-402, 1776 F Street, N.W., Washington, D.C. 20429, on business days between 8:30 a.m. and 5:00 p.m. Comments may be sent through facsimile to (202) 898-3838 or by the Internet to: COMMENTS@FDIC.GOV. Comments will be available for inspection at the FDIC Public Information Center, room 100, 801 17th Street, N.W., Washington, D.C., between 9:00 a.m. and 4:30 p.m. on business days.

A copy of the comments may also be submitted to the OMB desk officer for the agencies: Alexander Hunt, Office of Information and Regulatory Affairs, Office of Management and Budget, New Executive Office Building, Room 3208, Washington, D.C. 20503.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the collection may be obtained by contacting:

OCC: Jessie Gates or Dionne Walsh, (202) 874-5090, Legislative and Regulatory Activities Division (1557-FISQ), Office of the Comptroller of the Currency, 250 E Street, SW, Washington, DC 20219. Internet address: REGS.COMMENTS@OCC.TREAS.GOV.

Board: Mary M. McLaughlin, Board Clearance Officer, (202) 452-3829, Division of Research and Statistics, Board of Governors of the Federal Reserve System, 20th & C Streets, N.W., Washington, D.C. 20551. For the hearing impaired only, Telecommunications Device for the Deaf (TDD), Dorothea Thompson, (202) 452-3544, Board of Governors of the Federal Reserve System, 20th & C Streets, N.W., Washington, D.C. 20551.

FDIC: Steven F. Hanft, FDIC Clearance Officer, (202) 898-3907, Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, D.C. 20429. Internet address: COMMENTS@FDIC.GOV.

SUPPLEMENTARY INFORMATION:

Title: (MA)—Financial Institutions Securities Qualifications Forms OMB Number: Not yet assigned.

Form Number: Forms SB, SBW, U-4B, and U-5B.

Abstract: This information collection covers the securities qualifications

forms for banks and bank employees involved in retail securities sales programs. This information will promote safe and sound operations of financial institution-sponsored securities sales programs and will enhance customer protection. Additionally, the collection will be instrumental in preventing unqualified or disqualified individuals from recommending or selling retail securities on behalf of financial institutions regulated by the OCC, Board, and FDIC.

Type of Review: New Collection.

Affected Public: Businesses or other for-profit.

OCC

Number of Respondents: 120.

Total Annual Responses: 1,248.

Frequency of Response: Occasionally.

Total Annual Burden Hours: 2,184.

Board

Number of Respondents: 100.

Total Annual Responses: 754.

Frequency of Response: Occasionally.

Total Annual Burden: 2,142.

FDIC

Number of Respondents: 70.

Total Annual Responses: 523.

Frequency of Response: Occasionally.

Total Annual Burden Hours: 1,483.

Comments

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on:

(a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information has practical utility;

(b) The accuracy of the agency's estimate of the burden of the collection of information;

(c) Ways to enhance the quality, utility, and clarity of the information to be collected;

(d) Ways to minimize the burden of the collection on respondents, including through the use of automated collection techniques or other forms of information technology; and

(e) Estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Dated: December 16, 1996.

Karen Solomon,

*Director, Legislative and Regulatory Activities
Division.*

By order of the Board of Governors of the
Federal Reserve System, December 16, 1996.

William W. Wiles,

Secretary of the Board.

By Order of the Board of Directors.

Dated at Washington, D.C., this 11th day of
December, 1996.

Federal Deposit Insurance Corporation

Jerry L. Langley,

Executive Secretary.

BILLING CODE 4810-33-P, 6210-01-P, 6714-01-P

FORM SB

OMB APPROVAL	
OMB Number:	XXXXX
Expires:	XXXXX
Estimated average burden	
hours per response	.....

UNIFORM NOTICE
FOR SPONSORING BANK

OCC (12/96)
FDIC (12/96)
FRB (12/96)

FORM SB INSTRUCTIONS

I. GENERAL INSTRUCTIONS

1. **FORM SB** - The Uniform Notice for Sponsoring Banks. Sponsoring Banks are required to file this form with their primary federal banking agency. Filing of the Form is to be made with the Central Registration Depository ("CRD") system which is operated by the National Association of Securities Dealers, Inc. ("NASD"). Sponsoring Banks will be assigned a unique CRD identification number which will be used to identify banks engaged in covered transactions and to identify bank securities representatives. The CRD is also used to track customer complaints and movement of bank securities representatives/registered representatives from one broker-dealer/sponsoring bank employer to the next.

The NASD is acting as agent for each of the federal banking agencies for purposes of receiving filings from Sponsoring Banks. These instructions apply both to electronic filing with the CRD System as well as filing of paper copies with the NASD.

2. **UPDATING** - By regulation, the Sponsoring Bank must update promptly Form SB information by submitting amendments whenever the information on file becomes materially inaccurate or incomplete for any reason.
3. **CONTACT EMPLOYEE** - The individual listed as the contact employee must be authorized to receive all compliance information, communications, and mailings, and be responsible for disseminating it within the Sponsoring Bank.
4. **FEDERAL INFORMATION LAW AND REQUIREMENTS** - The information in this form is required by the federal banking agencies. See 12 CFR, Part 12 Subpart B (OCC); 12 CFR, Part 208 (FRB); and 12 CFR Part 342 (FDIC). The information is used for regulatory purposes, including deciding whether to grant registration. The federal banking agencies maintain files of the information on this form and, through the NASD, intend to make it publicly available. Sponsoring Banks are not required to file Form SB with the federal banking agencies if the form does not have a current OMB number.

A. PAPER FILING INSTRUCTIONS

1. FORMAT

- a. Attach the Execution Page (Page 5) with original manual signatures to the initial Form SB filing and each amendment to the Form. Complete all amended pages in full.
- b. Give the name of the Sponsoring Bank and date on each page.
- c. Use only the current version or photocopy of Form SB.

I. GENERAL INSTRUCTIONS (Cont'd)**B. ELECTRONIC FILING INSTRUCTIONS**

Contact the NASD's CRD ((301) 590-6500) for information and software concerning electronic access to the CRD.

1. FORMAT

- a. A full paper Form SB is required when the Sponsoring Bank is filing with the federal banking agency for the first time.
- b. All items must be answered and all fields requiring a response must be completed before the filing will be accepted.
- c. A Sponsoring Bank must complete the execution screen certifying that Form SB and amendments thereto have been executed properly and that the information contained therein is accurate and complete.
- d. To amend information, the Sponsoring Bank must update the appropriate Form SB screens.
- e. A paper copy, with original manual signatures, of the initial Form SB filing and amendments must be retained by the Sponsoring Bank and made available for inspection by the bank's federal banking agency.

The mailing address for the federal banking agencies for questions and correspondence regarding Form SB is:

Federal Deposit Insurance Corporation
Office of the Comptroller of the Currency, or
Board of Governors for the Federal Reserve System
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

II. DISCLOSURE REPORTING PAGE (DRP)

Information concerning the Sponsoring Bank that relates to the occurrence of an event reportable under Item 5 must be provided on the Sponsoring Bank's appropriate DRP (SB).

EXPLANATION OF TERMS

(The following terms are italicized throughout this form)

List of Defined Terms

1. GENERAL

Applicant - The Sponsoring Bank applying on or amending this form.

Bank - any insured depository institution, as defined at 12 U.S.C. 1813(c)(2). Bank shall not include a branch of a bank located outside of any state as defined at 12 U.S.C. 1813 (a)(3).

Central Registration Depository (CRD) - database operated by the NASD.

Covered Sale - means a retail solicitation, recommendation, purchase, or sale of a covered product by a bank through its employees regardless of the means through which the solicitation, recommendation, purchase or sale occurs. The term shall not include a covered transaction involving a fiduciary account administered by a bank, a transaction involving a municipal security by a municipal securities dealer bank registered under section 15B of the Securities Exchange Act of 1934, 15 U.S.C. 78o-4, or a transaction by a bank of its own securities consistent with the conditions set forth in Securities Exchange Act Rule 3a4-1(a)(4), 17 CFR 240.3a4-1(a)(4).

Covered Transaction - has the same meaning as "security" as defined at section 3(a)(10) of the Securities Exchange Act, 15 U.S.C. 78c(a)(10). The term shall not include any product that is a deposit as defined in section 3(1) of the Federal Deposit Insurance Act, 12 U.S.C. 1813(1), or any "government security" as defined at section 3(a)(42) of the Securities Exchange Act of 1934, 15 U.S.C. 78c(a)(42).

Self-Regulatory Organization ("SRO") - means any national securities and commodities exchange, any national securities association (e.g., the NASD), or any registered clearing agency.

Sponsoring Bank - means a bank that engages in or seeks to engage in "covered transactions."

2. FOR THE PURPOSE OF ITEM 5 AND THE CORRESPONDING DISCLOSURE REPORTING PAGES (DRPs):

Charged - Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

Enjoined - Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction or a temporary restraining order.

II. FOR THE PURPOSE OF ITEM 5 AND THE CORRESPONDING DISCLOSURE REPORTING PAGES (DRPs): (Cont'd)

Felony - For *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000.

Foreign Financial Regulatory Agency - Includes (1) a foreign securities authority; (2) other governmental body or foreign equivalent of a *self-regulatory organization* empowered by a foreign government to administer or enforce its laws relating to the regulation of *investment-related* activities; or (3) a foreign membership organization, a function of which is to regulate the participation of its members in *investment-related* activities listed above.

Found - Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

Investment or Investment-Related - Pertaining to securities, commodities, banking, insurance or real estate (including, but not limited to, acting as or being associated with a broker-dealer, issuer, investment company, investment adviser, futures sponsor, bank or savings association).

Involved - Doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

Jurisdiction - A state, the District of Columbia, any Territory of the United States, the Commonwealth of Puerto Rico, Guam, American Samoa, the Virgin Islands, or any subdivision or regulatory body thereof.

Minor Rule Violation - A violation of a *self-regulatory organization* rule which has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate *self-regulatory organization* to determine if a particular rule violation has been designated as "minor" for these purposes.

Misdemeanor - For *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000.

Order - A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an order.

Proceeding - Includes a formal administrative or civil action initiated by a governmental agency, *self-regulatory organization* or *foreign financial regulatory authority*, a *felony* criminal indictment or information (or equivalent formal charge), or a *misdemeanor* criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal

criminal indictment or information (or equivalent formal charge). NOTE: *Investment-related* civil litigation, other than that specified above, is reportable under Item 5H on Form U-4B. An *investigation* is reportable under Item 5G on Form U-4B.

EXECUTION:

The undersigned, states that he/she has executed this form on behalf of, and with the authority of, said Sponsoring Bank. The undersigned and the Sponsoring Bank represent that the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete. The undersigned and Sponsoring Bank further represent that to the extent any information previously submitted is not amended such information is currently accurate and complete.

Date: (MM/DD/YYYY)

Name of Sponsoring Bank

BY: _____
Signature

Print Name and Title

FORM SB PAGE 1 (Revised) X-XX	Applicant Name: _____ Date: _____ Bank CRD No.: _____	OFFICIAL USE	official use only
WARNING: Intentional misstatements or omissions of facts may constitute criminal violations			
1. (A) Full name of Sponsoring Bank: _____ (B) Sponsoring Bank CRD No.: _____ (C) Sponsoring Bank's main address: _____ (D) Mailing address, if different: _____ (E) Area Code/Telephone No.: _____			
2. Contact employee for securities activities of Sponsoring Bank. Name: _____ Title: _____ Address: _____ Suite: _____ City, State: _____ Phone: _____			
3. Type of Charter State _____ National _____			
4. Federal Banking Agency Identification Number (answer one of the items below). A. OCC Charter # _____ (national banks) B. FDIC Insurance Certificate # _____ (state chartered, non-members banks); or C. FRB ID# _____ (state chartered, member banks)			
5. Use the appropriate DRP for providing details to "yes" answers to the questions in Item 5. Refer to the Explanation of Terms section of Form SB Instructions for explanations of italicized terms.			
CRIMINAL DISCLOSURE			
A. In the past ten years has the <i>applicant</i> :			
(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic or foreign court to any <i>felony</i> ?			Yes No <input type="checkbox"/> <input type="checkbox"/>
(2) been <i>charged</i> with any <i>felony</i> ?			<input type="checkbox"/> <input type="checkbox"/>
B. In the past ten years has the applicant:			
(1) been convicted of or pled guilt or nolo contendere ("no contest") in a domestic or foreign court to a <i>misdemeanor involving</i> : investments or an <i>investment-related</i> business, or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?			<input type="checkbox"/> <input type="checkbox"/>
(2) been <i>charged</i> with a misdemeanor specified in 5B?			<input type="checkbox"/> <input type="checkbox"/>

<p>FORM SB PAGE 2 (Revised) X-XX</p>	<p>Applicant Name: _____</p> <p>Date: _____ Bank CRD No.: _____</p>	<p>OFFICIAL USE</p>	<p>official use only</p>
REGULATORY ACTION DISCLOSURE			
<p>C. Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever:</p> <p>(1) <i>found</i> the applicant to have made a false statement or omission?</p> <p>(2) <i>found</i> the applicant to have been <i>involved</i> in a violation of its regulations or statutes?</p> <p>(3) <i>found</i> the applicant to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked, or restricted?</p> <p>(4) entered an <i>order</i> against the applicant in connection with <i>investment-related activity</i>?</p> <p>(5) imposed a civil money penalty on the applicant, or <i>ordered</i> the applicant to cease and desist from any activity?</p>		<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>D. Has any other federal regulatory agency, any state regulatory agency, or <i>foreign financial regulatory authority</i>:</p> <p>(1) ever <i>found</i> the <i>applicant</i> to have made a false statement or omission or been dishonest, unfair, or unethical? ...</p> <p>(2) ever <i>found</i> the <i>applicant</i> to have been <i>involved</i> in a violation of <i>investment-related</i> regulations or statutes? ...</p> <p>(3) ever <i>found</i> the <i>applicant</i> to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked, or restricted?</p> <p>(4) in the past ten years, entered an <i>order</i> against the applicant in connection with an <i>investment-related activity</i>? ..</p> <p>(5) ever denied, suspended, or revoked the <i>applicant's</i> registration or license or otherwise, by <i>order</i>, prevented it from associating with an investment-related business or restricted its activities?</p>		<p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>E. Has any <i>self-regulatory organization</i> or commodities exchange:</p> <p>(1) <i>found</i> the <i>applicant</i> to have made a false statement or omission?</p> <p>(2) <i>found</i> the <i>applicant</i> to have been <i>involved</i> in a violation of its rules (other than a violation designated as a "<i>minor rule violation</i>" under a plan approved by the U.S. Securities and Exchange Commission)?</p> <p>(3) <i>found</i> the <i>applicant</i> to have been the cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked, or restricted?</p> <p>(4) disciplined the <i>applicant</i> by expelling or suspending it from membership, barring or suspending its association with other members, or otherwise restricting its activities?</p>		<p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>F. Has the applicant's or a control affiliate's authorization to act as an attorney, accountant, or federal contractor ever been revoked or suspended?</p>		<p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>G. Is the applicant or a control affiliate now the subject of any regulatory proceeding that could result in a "yes" answer to any part of 11C, D, or E?</p>		<p><input type="checkbox"/> <input type="checkbox"/></p>	
CIVIL JUDICIAL DISCLOSURE			
<p>H. (1) Has any domestic or foreign court:</p> <p>(a) in the past ten years, enjoined the applicant or a control affiliate in connection with any investment-related activity?</p> <p>(b) ever found that the applicant or a control affiliate was involved in a violation of investment-related statutes or regulations?</p> <p>(c) ever dismissed, pursuant to a settlement agreement, and investment-related civil action brought against the applicant or control affiliate by a state or foreign financial regulatory authority?</p>		<p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>(2) Is the applicant or a control affiliate now the subject of any civil proceeding that could result in a "yes" answer to any part of 11H(1)?</p>		<p><input type="checkbox"/> <input type="checkbox"/></p>	

FORM SB PAGE 3 (Revised) X-XX	Applicant Name: _____	OFFICIAL USE	official use only
	Date: _____ Bank CRD No.: _____		
FINANCIAL DISCLOSURE			
I. In the past ten years has the applicant or a control affiliate of the applicant ever been a securities firm or a control affiliate of a securities firm that:		Yes	No
(1) has been the subject of a bankruptcy petition?		<input type="checkbox"/>	<input type="checkbox"/>
(2) has had a trustee appointee or a direct payment procedure initiated under the Securities Investor Protection Act?		<input type="checkbox"/>	<input type="checkbox"/>
J. Has a bonding company ever denied, paid out on, or revoked a bond for the applicant?		<input type="checkbox"/>	<input type="checkbox"/>
K. Does the applicant have any unsatisfied judgements or liens against it?		<input type="checkbox"/>	<input type="checkbox"/>
EXECUTION: I swear or affirm that all of the information I am filing is correct, that I am authorized to execute this form for the Sponsoring Bank, and that the Sponsoring Bank's books and records will be preserved and available for inspection as required by law.			
Date: _____ Name: _____			
Telephone No.: () _____			
By: (Signature and Title) _____ _____			

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (SB)

General Instructions

This Disclosure Reporting Page (DRP SB) is an initial or amended response used to report details for affirmative responses to Items 5H of Form SB:

Check item(s) being responded to:

- 5H(1) Has any domestic or foreign court:
- (a) in the past ten years, enjoined the applicant in connection with any investment-related activity?
 - (b) ever found that the applicant was involved in a violation of investment-related statutes or regulations?
 - (c) ever dismissed, pursuant to a settlement agreement, an investment-related civil action brought against the applicant by a state or foreign financial regulatory authority?
- 5H(2) Is the applicant now the subject of any civil proceeding that could result in a yes answer to any part of 5H?

One event may result in more than one affirmative answer within each of the above items. Use only one DRP to report details related to the same event. Unrelated civil judicial actions must be reported on separate DRPs.

PART I

Name of Applicant _____

Applicant CRD Number _____

PART II

1. Court Action Initiated by: (Name the regulator, foreign financial regulatory authority, SRO, commodities exchange, Agency, Firm, Private Plaintiff, etc.) _____

2. Relief Sought: (Temporary Restraining Order, Mandatory Injunction, Preliminary Injunction, etc.) _____

3. Filing Date of Court Action: MM/DD/YY _____

4. Product Type(s): _____

5. Court formal action was brought in: (Name of federal, military, state or foreign court) _____

6. Location of Court: (City or County and State or Country) _____

7. Docket/Case Number: _____

8. Not Applicable

9. Describe allegations relating to this court action: (use reverse side of this sheet for additional comments if necessary.) _____

10. Is action currently: (check one)
 pending on appeal final

11. If pending, date notice was served: (MM/DD/YY) _____

12. If on appeal, action appealed to: (provide name of court) _____

13. If on appeal, date filed: (MM/DD/YY) _____

IF FINAL OR ON APPEAL, COMPLETE ALL ITEMS BELOW. FOR PENDING ACTIONS, COMPLETE ITEM 21 ONLY.

14. How was the matter resolved? (Settled, Consent, Judgment Rendered, etc.) _____

15. Resolution Date: (MM/DD/YY) _____

16. Sanctions: (Suspended, Censured, etc.) _____

17. If Suspended, Enjoined or Barred: Yes No

Is suspension/injunction/bar of a fixed duration? (If no, provide details in Item 21.) Yes No

Suspension/Injunction/Bar Start Date: (MM/DD/YY) _____

Suspension/Bar Injunction/Duration: _____

Suspension/Injunction/Bar capacity affected: (General Securities Principal, Financial & Operations Principal, Options Trading, etc.) _____

18. If requalification by exam/retraining was a condition of the disposition: _____

Is requalification/retraining time-related? _____

If yes, length of time given to requalify/retrain: (If no, provide details in Item 21.) _____

Type of exam required for requalification: _____

Has condition been satisfied? Yes No

19. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation: (Fill in amount on appropriate line)

Penalty/Fine:	\$ _____	Date Paid (MM/DD/YY)	_____
Restitution:	\$ _____	Date Paid (MM/DD/YY)	_____
Disgorgement:	\$ _____	Date Paid (MM/DD/YY)	_____
Other:	\$ _____	Date Paid (MM/DD/YY)	_____

20. Not Applicable

21. Provide a brief summary of circumstances related to action(s), allegation(s), disposition(s) and/or finding(s) disclosed above. (Use reverse side of this sheet for additional comments if necessary.) _____

CRIMINAL DISCLOSURE REPORTING PAGE (SB)

General Instructions

This Disclosure Reporting Page (DRP SB) is an initial or amended response used to report details for affirmative responses to Items 5A or 5B of Form SB:

Check item(s) being responded to:

5A In the past ten years has the applicant:

- (1) been convicted or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?
- (2) been charged with any felony?

5B In the past ten years has the applicant:

- (1) been convicted or pled guilty or nolo contendere ("no contest") in a domestic, foreign or military court to a misdemeanor involving: investments or an investment-related business, or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?
- (2) been charged with a misdemeanor specified in 5B(1)?

Multiple counts of the same charge arising out of the same event(s) should be reported on the same DRP. Unrelated criminal actions, including separate cases arising out of the same event, must be reported on separate DRPs. Use this DRP to report all charges arising out of the same event. One event may result in more than one affirmative answer to the above items.

Applicable court documents (i.e., criminal complaint, information or indictment as well as judgement of conviction or sentencing documents) must be provided to the CRD if not previously submitted.

PART I

Name of Applicant _____

Applicant CRD Number _____

PART II

1. Formal charge(s) were brought in:

Court: (Name of Federal, Military, State or Foreign Court)

Location of Court: (City or County and State or Country)

Docket / Case Number:

2. Charge Detail Disclosure: (Continue on additional Criminal Disclosure Reporting Page SB if more than three charges arise out of the same event.)

Formal Charge(s) Description:	Charge Date : (MM/DD/YY)	No. of counts	Charge Type (Check one only)		Plea (Guilty, Not Guilty, etc.)	Charge is currently (check one only)	Appeal Date (MM/DD/YY)	Product Type (if charge is investment related)
			Misdemeanor	Felony				
1.						<input type="checkbox"/> Pending <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-trial Intervention <input type="checkbox"/> Final		
2.						<input type="checkbox"/> Pending <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-trial Intervention <input type="checkbox"/> Final		
3.						<input type="checkbox"/> Pending <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-trial Intervention <input type="checkbox"/> Final		

IF FINAL, ON APPEAL, OR PRE-TRIAL INTERVENTION, COMPLETE ITEMS 3 AND 4. FOR EACH CHARGE THAT IS PENDING, COMPLETE ONLY ITEM 4.

3. Disposition Detail Disclosure: (Continue on another Criminal Disclosure Reporting Page SB if more than three charges.)

Disposition Type: (Convicted, Acquitted, Dismissed, Pre-Trial Intervention, etc.)	Disposition Date : (MM/YY/DD)	Disposition Detail: Sentence/Penalty (if applicable)	Duration: (if sentence suspension, probation, etc.)	Start Date: (MM/DD/YY)	Penalty/Fine Amount: (if applicable)	Date Paid: (MM/DD/YY)
1.						
2.						
3.						

4. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which was the subject of the charge(s) occurred. (Use reverse side of this sheet for additional comments if necessary.)

REGULATORY ACTION DISCLOSURE REPORTING PAGE (SB)

General Instructions

This Disclosure Reporting Page (DRP BD) is an initial or amended response used to report details for affirmative responses to Item 5A and 5B of Form SB:

Check items being responded to:

5c Has the US Securities and Exchange Commission or the Commodity Futures Trading Commission ever:

- (1) Found the applicant to have made a false statement or omission?
- (2) Found the applicant to have been involved in a violation of its regulations or statutes?
- (3) Found the applicant to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?
- (4) Entered an order against the applicant in connection with investment-related activity?
- (5) Imposed a civil money penalty on the applicant, or ordered the applicant to cease and desist from any activity?

5d Has any other federal regulatory agency, any state regulatory agency or foreign financial regulatory authority:

- (1) Ever found the applicant to have made a false statement, or omission, or been dishonest, unfair, or unethical?
- (2) Ever found the applicant to have been involved in a violation of investment-related regulations or statutes?
- (3) Ever found the applicant to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted?
- (4) In the past ten years, entered an order against the applicant in connection with an investment-related activity?
- (5) Ever denied, suspended or revoked the applicant's registration or license or otherwise, by order, prevented it from associating with an investment-related business or restricted its activities?

5e Has any self-regulatory organization or commodities exchange ever:

- (1) Found the applicant to have made a false statement or omission?
- (2) Found the applicant to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the US Securities and Exchange Commission)?
- (3) Found the applicant to have been the cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted?
- (4) Disciplined the applicant by expelling or suspending it from membership, barring or suspending its association with other members, or otherwise restricting its activities?

5f Has the applicant's authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended?

5g Is the applicant now the subject of any regulatory proceedings that could result in a yes answer to any part of 5C, D, or E?

One event may result in more than one affirmative answer within each of the above items. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

Part I

Name of Applicant _____

Applicant CRD Number _____

Part II

1. Regulatory action initiated by: <i>(Name the regulator, foreign financial regulatory authority, SRO or commodities exchange, etc.)</i>		2. Regulatory action type:
3. Date initiated: <i>(MM/DD/YY)</i>	4. Docket / Case Number:	5. Employing Firm when events occurred:
6. Product Type(s):		
7. Describe the allegations related to this regulatory action: <i>(Use reverse side of this sheet for additional comments if necessary.)</i>		
8. Is regulatory action currently: <i>(check one)</i> <input type="checkbox"/> pending <input type="checkbox"/> on appeal <input type="checkbox"/> final	9. If on appeal, regulatory action appealed to: <i>(SEC, SRO, US Court of Appeals, etc.)</i>	10. If on appeal, date filed: <i>(MM/DD/YY)</i>

IF FINAL OR ON APPEAL, COMPLETE ALL ITEMS BELOW. FOR PENDING ACTIONS, COMPLETE ITEM 19 ONLY.

11. How was the matter resolved? <i>(settled, consent, etc.)</i>		12. Resolution date: <i>(MM/DD/YY)</i>		13. Sanctions: <i>(suspended, censured, barred, requalification, etc.)</i>	
14. If Suspended, Enjoined or Barred:	Is suspension/injunction/bar of a fixed duration? <i>(If no, provide details in Item 19.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	Suspension/Injunction/Bar Start Date: <i>(MM/DD/YY)</i>	Suspension/Bar Injunction/Duration:	Suspension/Injunction/Bar capacity affected: <i>(General Securities Principal, Financial & Operations Principal, Options Trading, etc.)</i>	
15. If requalification by exam/retraining was a condition of the sanction:	Is requalification/retraining time-related?	If yes, length of time given to requalify/retrain: <i>(If no, provide details in item 19.)</i>	Type of exam required for requalification:	Has condition been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No	
16. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation: <i>(Fill in amount on appropriate line)</i>	Penalty/Fine:	\$	Date Paid <i>(MM/DD/YY)</i>		
	Restitution:	\$	Date Paid <i>(MM/DD/YY)</i>		
	Disgorgement:	\$	Date Paid <i>(MM/DD/YY)</i>		
	Other:	\$	Date Paid <i>(MM/DD/YY)</i>		
17. Not Applicable.					
18. Was payment of all or any part of a monetary award, penalty or fine waived? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, provide details of Waiver in 19 below.)</i>					
19. Provide summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates. <i>(Use reverse side of this sheet for additional comments if necessary.)</i>					

FORM SBW

OMB APPROVAL	
OMB Number:	XXXXX
Expires:	XXXXX
Estimated average burden hours per response	.....

UNIFORM NOTICE
FOR SPONSORING BANK
WITHDRAWAL

OCC (12/96)
FDIC (12/96)
FRB (12/96)

GENERAL INSTRUCTIONS

Filing Requirements

File Form SBW when a Sponsoring Bank ceases to engage in covered sales. Form SBW is to be filed with the appropriate federal banking agency by submitting Form SBW to the NASD's CRD.

Written Submissions:

- Each copy of this Form must be manually signed by the contact employee.
- Type all information.
- Use only the Form SBW or a reproduction of it.
- The mailing address for the Federal Banking Agencies for questions and correspondence regarding Form SB is:

**Federal Deposit Insurance Corporation
Office of the Comptroller of the Currency, or
Board of Governors for the Federal Reserve System
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401**

Electronic Submissions:

Contact the NASD's CRD ((301) 590-6500) for information and software concerning electronic access to the CRD.

- Each submission must be certified by Sponsoring Bank's contact employee.

Definitions

Contact Employee - The individual identified by the Sponsoring Bank on its Form SB who is authorized to receive all compliance information, communications, and mailings, and be responsible for disseminating it within the Sponsoring Bank.

Covered Sale - means a retail solicitation, recommendation, purchase, or sale of a covered product by a bank through its employees regardless of the means through which the solicitation, recommendation, purchase or sale occurs. The term shall not include a covered transaction involving a fiduciary account administered by a bank, a transaction involving a municipal security by a municipal securities dealer bank registered under section 15B of the Securities Exchange Act of 1934, 15 U.S.C. 78o-4, or a transaction by a bank of its own securities consistent with the conditions set forth in Securities Exchange Act Rule 3a4-1(a)(4), 17 CFR 240.3a4-1(a)(4).

Covered Transaction - has the same meaning as "security" as defined at section 3(a)(10) of the Securities Exchange Act, 15 U.S.C. 78c(a)(10). The term shall not include any product that is a deposit as defined in section 3(1) of the Federal Deposit Insurance Act, 12 U.S.C. 1813(1), or any "government security" as defined at section 3(a)(42) of the Securities Exchange Act of 1934, 15 U.S.C. 78c(a)(42).

Sponsoring Bank - means a bank that engages in or seeks to engage in "covered transactions."

FORM SBW Revised X-XX	UNIFORM NOTICE FOR WITHDRAWAL FROM SPONSORING BANK REGISTRATION	OFFICIAL USE
WARNING: Intentional misstatements or omissions of facts may constitute criminal violations		
<p>1. (A) Full name of Sponsoring Bank: _____ (B) Sponsoring Bank CRD No.: _____</p> <p>(C) Bank's main address: _____ (D) Mailing address, if different: _____</p> <p>(E) Area Code/Telephone No.: _____</p>		
<p>2. Date Sponsoring Bank ceased covered transactions: _____</p>		
<p>3. Does the Sponsoring Bank owe any money or securities to any customer or broker-dealer? Yes___ No___ If "yes":</p> <p>(A) Number of customers owned fund or securities _____</p> <p>(B) Amount of money owed to: Customers \$ _____ broker-dealer \$ _____</p> <p>(C) Market value of securities owned to: Customers \$ _____ broker-dealer \$ _____</p> <p>(D) Arrangements made for payment: _____</p>		
<p>4. Is Sponsoring Bank now the subject of any:</p> <p>(A) reportable complaint, investigation, or proceeding not reported on Form SB?.....Yes___ No___</p> <p>(B) unsatisfied judgments or liens not reported on Form SB?.....Yes___ No___</p> <p>(C) unsatisfied customer claims for funds or securities nor reported under item 3?.....Yes___ No___</p> <p>Furnish full details for all "yes" answers on an attachment sheet. For any court or regulatory action, give: (1) the sponsoring bank and individual's name, (2) the title and date of the action, (3) the court or body taking the action, and (4) a description of the action.</p>		
<p>5. (A) Name, address and telephone number of the person who will have custody of books and records:</p> <p>(B) Address where books and records will be located, if different: _____</p>		
<p>6. EXECUTION: I swear or affirm that all of the information I am filing is correct, that I am authorized to execute this form for the Sponsoring Bank, and that the Sponsoring Bank's books and records will be preserved and available for inspection as required by law.</p>		
Date:	Name:	Telephone No.: ()
By: (Signature and Title)		

**Attachment
Sheet
for Form SBW**

Sponsoring Bank: _____

CRD No.: _____ Date: _____

[Large empty rectangular area for content]

OMB No. xxxx-xxxx (OCC) Expires x/xx/xx
xxxx-xxxx (FDIC) Expires x/xx/xx
xxxx-xxxx (FRS) Expires x/xx/xx
Average hours per response: x.xx

Form U-4B

**Uniform Application
for
Bank Securities Representative
Registration or Transfer**

FORM U-4B

UNIFORM APPLICATION FOR BANK SECURITIES REPRESENTATIVE REGISTRATION OR TRANSFER

Public reporting burden for this information collection is estimated to vary from X.X to X,XXX hours per response, with an average of XX.XX hours per response, including time to gather and maintain data in the required form and to review instructions and complete the information collection. Comments regarding this burden estimated or any other aspect of this information collection, including suggestions for reducing the burden, may be sent to:

Secretary
Board of Governors of the Federal Reserve System
20th and C Streets, NW
Washington, DC 20551

and

Office of Management and Budget
Paperwork Reduction Project (7100-0XXX)
Washington, DC 20503.

GENERAL INSTRUCTIONS

The Form U-4B is the Uniform Application for Bank Securities Representatives Registration or Transfer. The Form is similar, but not identical to, the Form U-4 used to register representatives of broker-dealers, investment advisers or issuers of securities. The Form U-4B is to be used by employees of state and nationally chartered banks which are not required to register as broker/dealers under the Securities Exchange Act of 1934, but which have filed Form SB, Uniform Notice for Sponsoring Bank. These instructions apply to filing Form U-4B with the Federal Banking Agencies.

As noted below, the term "Federal Banking Agency", as used in the Form U-4B, means the Federal Deposit Insurance Corporation (FDIC), the Board of Governors of the Federal Reserve System (FRS) and the Office of the Comptroller of the Currency (OCC). In addition, the term "Sponsoring Bank" shall

mean those banks which have filed Form SB, Uniform Notice for Sponsoring Bank.

Where applicable, applicants must complete Items 1-22 and all fields requiring a response must be completed before the filing is accepted. Enter "none" or "N/A" (not applicable) where appropriate.

A full, complete Form U-4B is required when filing for the first time.

Use the Disclosure Reporting Pages (DRPs U-4B) to provide details to "Yes" answers to Item 22.

An applicant and the Sponsoring Bank are under a continuing obligation to update information required by Form U-4B as changes occur. Sponsoring Banks are not required to submit a complete Form U-4B when submitting amendments. Rather, the Sponsoring Bank should update only the appropriate sections of Form U-4B and file the applicable pages. Amendments are to be filed promptly and normally no more than 30 days after the occurrence of the event which triggers the requirement to file an amendment.

Filings and amendments must be signed and submitted by the Sponsoring Bank on behalf of the applicant. A paper copy with original manual signatures of the initial Form U-4B and of amendments to the Disclosure Reporting Pages (DRPs U-4B) must be retained by the filing Sponsoring Bank and must be made available for inspection upon regulatory request.

The Federal Banking Agencies mailing address for Filings and correspondence relating to filings is:

Federal Deposit Insurance Corporation,
Federal Reserve System, or
Office of the Comptroller of the Currency (as appropriate)
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

EXPLANATION OF TERMS

The following terms are italicized throughout this form.

For purposes of filing this Form U-4B:

The term **Federal Banking Agency** means the Federal Deposit Insurance Corporation, the Board of Governors of the Federal Reserve System, or the Office of the Comptroller of the Currency, Department of the Treasury, as appropriate.

The term **Bank Securities Representative** means an employee of a state or nationally chartered bank who has, or will be, engaged in the retail solicitation, recommendation, purchase or sale of covered products as defined in the Federal Bank Agency regulations—12 CFR 342, 12 CFR 208, and 12 CFR 12.

The term **Sponsoring Bank** means a state or nationally chartered bank that engages in the retail solicitation, recommendation, purchase or sale of covered products without registering as a broker/dealer under the Securities and Exchange Act of 1934, and has filed a Form SB Uniform Notice for Sponsoring Bank with the appropriate Federal Banking Agency.

The term **Jurisdiction** means a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

The term **Self-Regulatory Organization ("SRO")** means any national securities and commodities exchange, any national securities association (e.g., the NASD), or any registered clearing agency.

The term **Control** means the power to direct or cause the direction of the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any individual or firm that is a director, partner, or officer exercising executive responsibility (or having similar status or functions) or that directly or indirectly has the right to vote 25 percent or more of the voting securities or is entitled to 25 percent or more of the profits is presumed to control that company.

The term **Appropriate Signatory** means the individual designated by the Sponsoring Bank who is authorized to execute Form U-4B on its behalf. Such individual must meet the criteria, if any, for acting as the "appropriate signatory" as established by the Federal Banking Agency requiring this form to be filed.

The term **Investment-Related** pertains to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, issuer, investment company, investment adviser, futures sponsor, bank or savings association).

For purposes of Item 22:

The term **Charged** means being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

The term **Involved** means doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

The term **Foreign Financial Regulatory Authority** includes a foreign securities authority; other governmental body or foreign equivalent of a *self-regulatory organization* empowered by a foreign government to administer or enforce its laws relating to the regulation of *investment-related* activities; or membership organization, a function of which is to regulate the participation of its members in *investment-related* activities listed above.

The term **Order** means a written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an order.

For the purposes of Items 22.A and 22.B and the corresponding DRP (U-4B):

The term **Felony**, for jurisdictions that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

The term **Misdemeanor**, for jurisdictions that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

For the purposes of Item 22.E and the corresponding DRP (U-4B):

A **Minor Rule Violation** is a violation of a *self-regulatory organization* rule which has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate *self-regulatory organization* to determine if a particular rule violation has been designated as "minor" for these purposes.

For the purposes of Item 22.G and the corresponding DRP (U-4B):

The term **Investigation** includes grand jury investigations, U.S. Securities and Exchange Commission investigations after the

"Wells" notice has been given, formal investigations by *SROs* or actions or procedures designated as investigations by *jurisdictions*, but does not include subpoenas, preliminary or routine regulatory inquiries or requests for information, deficiency letters, "blue sheet" requests or other trading questionnaires, or examinations.

The term **Proceeding** includes a formal administrative or civil action initiated by a *Federal Banking Agency*, governmental agency, *self-regulatory organization* or *foreign financial regulatory authority*, a *felony* criminal indictment or information (or equivalent formal charge), or a *misdemeanor* criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal criminal indictment or information (or equivalent formal charge). NOTE: *Investment-related* civil litigation, other than that specified above, is reportable under Item 22.H on Form U-4B. An *investigation* is reportable under Item 22.G on Form U-4B.

For the purposes of Item 22.H and the corresponding DRP (U-4B):

The term **Enjoined** includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction or a temporary restraining order.

For the purposes of Item 22.J and the corresponding DRP (U-4B):

The terms **Resign** or **Resigned** relate to separation from employment with any employer and are not restricted to *investment-related* employment. Include any termination in which the allegations are a proximate cause of the separation, even if the separation was initiated by you.

SPECIFIC INSTRUCTIONS

1. **Last Name.** The applicant's last name will include punctuation(s) when and where appropriate. An entry is required for processing initial and amended Form U-4B filings.

First Name. Do not use nicknames, abbreviations, or modifications to the applicant's first name. An entry is required for processing initial and amended Form U-4B filings.

Middle Name. If the applicant does not have a middle name specify "NONE". Do not leave this field blank. Do not include nicknames, abbreviations, or modifications to the applicant's middle name. This term is required for processing initial and amended Form U-4B filings.

2. **Applicant's CRD #.** The Applicant's CRD number is assigned to the applicant by the Central Registration Depository (CRD) system. If the applicant's CRD number is not known, leave this item blank. New applicants will receive a

unique CRD number that is permanently assigned and remains with the individual throughout his or her registration history, regardless of employment changes. It is not necessary to include leading zeros. An entry is not required for processing an initial Form U-4B filing but is required for amended U-4B filings.

Applicant's SS #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-4B. If the form is being filed on behalf of a foreigner who has not been issued a social security number, indicate "FOREIGNER" in this item. Entry is required in this field for processing of the initial and amended Form U-4B filings.

3. **Sponsoring Bank CRD #.** Sponsoring Banks are assigned a unique CRD number. This number is system generated and uniquely identifies the organization. An entry is required in this field for processing initial and amended Form U-4B filings.

4. **Sponsoring Bank.** This is the Sponsoring Bank's complete name as listed on Form SB. Do not abbreviate, shorten, or modify the name. An entry is required in this field for processing initial and amended Form U-4B filings.

5. **Employment Date.** The filing of the U-4B assumes that the individual is employed with your Sponsoring Bank; therefore, this item requires the month, day, and year of hire rather than the application for registration date. The format should be numeric (e.g., 01/01/1995 equals January 1, 1995). This is a required field for processing the initial Form U-4B filing.

6. **CRD Branch #.** Not applicable for Form U-4B filings.

7. **Billing Code.** The Billing Code is an alpha/numeric value consisting of up to eight characters. It is the responsibility of the Sponsoring Bank to establish and maintain its own set of unique billing codes. If your Sponsoring Bank does not use CRD billing codes, leave this field blank. This is not a required field.

8. **Office of Employment Address.** Not applicable for Form U-4B filings.

9. **Dual Registration.** Check the appropriate "Yes" or "No" box regarding whether the applicant will maintain dual registration with another broker-dealer or another investment adviser that is not under common ownership or control with the Sponsoring Bank. If you choose "Yes", consult the rules and statutes of the appropriate *Self Regulatory Organization(s)* and *jurisdiction(s)* for prohibitions and liability provisions. Employment with other broker-dealers or investment advisers must be listed in the Employment and Personal History (Item 20.A) on Page 2 of the Form U-4B.

10. **Affiliated Firms.** Not applicable for Form U-4B filings.

11. Federal Banking Agency. Check the appropriate Federal Banking Agency box(es) with which the applicant wishes to register. Applicable fees should be submitted with the filing unless the Federal Banking Agency maintains sufficient funds in its CRD account. If an examination is required for registration, the exam will be automatically scheduled and fee(s) charged appropriately. Registration applications will not be processed unless the Sponsoring Bank has filed Form SB or has an application pending.

12. Mark Registration Category(ies). Check all appropriate registration categories desired. If the applicant is not qualified for a category of registration requested, the appropriate examination(s) will be scheduled automatically, and the examination fee(s) deducted from the firm's CRD account.

13. Complete this section only if you are scheduling or rescheduling an exam or continuing education session. The purpose of this item is to schedule or reschedule examinations or Continuing Education sessions. Checking an exam box will not generate a registration request/approval but will schedule the appropriate examination even if the applicant has previously passed the examination. Check the S101 (Continuing Education session) box will request an unscheduled session even if the applicant has previously satisfied the Continuing Education requirement. An unscheduled session will not fulfill the applicant's Continuing Education requirement.

Signatory Area

Date. This date represents the date the form was signed by the appropriate signatory. The correct format for the date entry is "MM/DD/YYYY." This is required field for U-4B Page 1 amended filings.

Signature of Appropriate Signatory. U-4B Page 1 need not be signed on initial or transfer filings. A signature is required when filing U-4B Page 1 as an amendment. If a U-4B Page 1 is being filed to schedule or reschedule an examination, complete items 1, 2, 3, 4, and 13 only. (If any other items are completed, a signature is required.) NOTE: "Signature" includes a manual signature or an electronically transmitted equivalent.

Type or Print Name. The signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in the signature form.

CRD Use Only. Do not mark inside this box. This area is used for administrative purposes only.

14. Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. This number is system generated and uniquely identifies the organization. An entry is required in this field for processing initial and amended Page 2 Form U-4B filings.

Applicant's Social Security #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-4B. If the form is being filed on behalf of a foreigner who has not been issued a social security number, indicate "FOREIGNER" in this item. Entry is required in this field for processing of the initial and amended Page 2 Form U-4B filings.

Applicant's CRD #. The Applicant's CRD is assigned to the applicant by the CRD system. If the applicant's CRD number is not known, leave this item blank. New applicants will receive a unique CRD number that is permanently assigned and remains with the individual throughout his or her registration history. It is not necessary to include leading zeros. An entry is required in this field for U-4B Page 2 amended filings.

Personal Data

The name inserted must be the applicant's full legal name.

15. Last Name. The applicant's last name will include punctuation(s) when and where appropriate. An entry is required for processing initial and Page 2 Form U-4B amended filings.

First Name. Do not use nicknames, abbreviations, or modifications to the applicant's first name. An entry is required for processing initial and amended Page 2 Form U-4B filings.

Middle Name. If the applicant does not have a middle name specify "NONE". Do not leave this field blank. This item is required for processing initial and amended Form U-4B filings. Do not include nicknames, abbreviations, or modifications to the applicant's middle name.

16. Maiden/Other Name(s) Known By. This item is used to record names used, currently or in the past, by the applicant other than the legal name. The field should include other names (maiden, married, alias, or nickname) used by the applicant since adulthood. This is not a required field.

17. Date of Birth. The date format should be MM/DD/YYYY. An entry must be in this field to process the initial Form U-4B.

State/Country of Birth. This field is used to record the applicant's place of birth. This is a required field for initial Form U-4B filings.

18. Sex. Indicate the appropriate box for gender. This is a required field for initial Form U-4B filings.

Height. The applicant's height must be measured in feet (ft) and inches (in). This is a required field for initial Form U-4B filings.

Weight. The applicant's weight must be measured in pounds (lbs). This is a required field for initial Form U-4B filings.

Hair Color. This is a two character item. This item is required for processing of the initial Form U-4B.

Eye Color. This is a two character item. This item is required for processing of the initial Form U-4B.

19. Residential History

Provide residential addresses for the past five years. The dates "From-To" must be such that there are no gaps greater than three months. Begin with your current residential address. Report changes as they occur. Do not use Post Office boxes. Use attachment sheet if additional space is needed.

From Month/Year. The month/year is MM/YYYY. This is a required field for each residence.

To Month/Year. The month/year is MM/YYYY. This is a required field for all residences except the current address.

Street. This item is used to capture the mailing description of the applicant's residence. P.O. Box addresses are not acceptable. Include street name, building #, unit #, apartment #, suite #, slip #, etc.

City. This item is used to capture the name of the city in which the applicant currently, or previously resided. This is a required field for all address history.

State/Country. This item identifies the state code where the applicant resides or resided in the past. Enter the two digit state abbreviation where the applicant resided for each address. If this is a foreign address indicate the country.

ZIP. Enter the applicant's residence nine digit ZIP Code or postal code if a foreign address.

20.A. Employment and Personal History

Provide the applicant's employment and personal history for the past ten years. The dates "From-To" must be such that there are no gaps greater than three months. Exclude the firm(s) noted in Items 4 and 10. Include all firm(s) in Item 9. Entries must include the start and end dates, the full name of the company, city and state/country. Account for all time including full and part-time employments, self employment, military service, and homemaking. Also include statuses such as unemployment, full-time education, or travel that lasted for at least one month.

From Month/Year. The month/year format is MM/YYYY. This is a required field for each employment.

To Month/Year. The month/year format is MM/YYYY. This is a required field for all employments.

Name. Enter employment/personal history. Do not abbreviate, shorten, or modify the name. Ten years of employment history is required. Exclude the firms noted in Items 4 and 10 on Page 1 of Form U-4B. This is a required field for each employment and personal history.

Investment-Related Business. Indicate "Yes" or "No" as to whether employer is (was) an *investment-related* business, regardless of the position held by applicant.

City. This item is used to capture the name of the city in which the applicant was employed. This is a required field for all employment and personal history.

State/Country. This item identifies the state or country where the applicant was employed. Enter the two digit state abbreviation where the applicant was employed for each address. If this is a foreign address indicate the country.

Position Held. Provide the applicant's last title or position held with each employer. Provide both functional and administrative titles when possible (e.g., vice president and director).

20.B. **Other Business.** The "Yes" or "No" boxes refer to whether an applicant is currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent, or otherwise. Exclude non-*investment-related* activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt. If "Yes", complete the Other Business Disclosure Reporting Page included in the Form U-4B.

Signatory Area

Date. This date represents the date the U-4B Page 2 was signed by the *appropriate signatory*. The correct format for the date entry is "MM/DD/YYYY". This is a required field for U-4B Page 2 amended filings.

Signature of Appropriate Signatory. Enter the applicant's signature. Signatures are required on Page 2 when the Form U-4B is an amended filing. U-4B Page 2 need not be signed for initial filings. NOTE: "Signature" includes a manual signature or an electronically transmitted equivalent.

Type or Print Name. The signatory's full legal name must be displayed under the signature. The name must be typed as it appears in signature form.

CRD Use Only. Do not mark inside this box. This space is used for administrative purposes only.

21. Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. This number is system generated and uniquely identifies the organization. An entry is required in this field for processing amended Page 3 Form U-4B filings.

Applicant's Social Security #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-4B. If the form is being filed on behalf of a foreigner who has not been issued a social security number, indicate "FOREIGNER" in this item. Entry is required in this field for processing of initial and amended Page 3 Form U-4B filings.

Applicant's CRD #. The Applicant's CRD number is assigned to the applicant by the CRD system. If the applicant's CRD number is not known, leave this item blank. New applicants will receive a unique CRD number that is permanently assigned and remains with the individual throughout his or her registration history. It is not necessary to include leading zeros. An entry is not required for processing an initial Form U-4B filing but is required for amended U-4B Page 3 filings.

22. Disclosure Information. Check the appropriate "Yes" or "No" response for each question. Complete details explaining any "Yes" answers must be provided on the appropriate Disclosure Reporting Pages (DRPs).

22.A.-M. Disclosure

Criminal Disclosure

- 22.A.—Felony Criminal Disclosure
- 22.B.—Misdemeanor Criminal Disclosure

Regulatory Action Disclosure

- 22.C.—Regulatory Action by SEC or CFTC
- 22.D.—Regulatory Action by Federal Banking Agency, other federal regulator, state regulatory, or foreign financial regulator
- 22.E.—Regulatory Action by SRO or commodities exchange
- 22.F.—Professional Suspension
- 22.G.—Formal Pending Action/Investigation

Civil Judicial Actions

- 22.H.—Civil/Judicial Actions

Customer Complaints

- 22.I.—Customer Complaints

Terminations

- 22.J.—Terminations for Cause

Financial Page 1

- 22.K.—Bankruptcy and SIPC

Financial Page 2

- 22.L.—Bonding Payouts or Revocations
- 22.M.—Unsatisfied Judgments and Liens

22.N. Disclosure Certification (Optional). The certification language contained in Item 22.N allows applicant to certify that all disclosable information on the individual's record has been previously reported on Form U-4B or Form U-5B DRPs. Certification should be used for full Form U-4B filings only, not amended filings. Applicants who have not been previously registered with the NASD, or who have not submitted DRPs for all disclosable information, may not take advantage of the certification option. Use of the certification is optional, and, if chosen, "Yes" answers to the appropriate questions in Items 22.A through M must be provided.

Signatory Area

"Signature" includes a manual signature or an electronically transmitted equivalent.

Date. This represents the date the form was signed by the *appropriate signatory*. The correct format for the date entry is "MM/DD/YYYY". Both the applicant and *appropriate signatory* must date this page only when it is being submitted as an amended filing.

Signature of Applicant. Page 3 need not be signed on initial or transfer filings. A signature is required when filing U-4B Page 3 as an amendment. Enter the applicant's full legal signature as it appears in typed or printed form.

Type or Print Name of Applicant. The applicant's full legal name must be displayed under the signature. The name must be typed or printed as it appears in signature form.

Signature of Appropriate Signatory. A signatory entry is not required for initial or transfer filings. This is a required field only when submitting as a U-4B Page 3 amendment.

Type or Print Name of Appropriate Signatory. The appropriate signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in signature form.

Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)

If amending, complete items 1,2,3,4 and items being amended.

1. Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		2. Applicant's CRD No.	Applicant's SSN
3. Sponsoring Bank CRD No.	4. Sponsoring Bank or Issuer Name (Do not include this employment under Item 20.A, page 2.)		
5. Employment Date (MM/DD/YYYY)	6. CRD Branch No. Not Applicable	7. Billing Code (optional)	8. Office of Employment Address Not Applicable

9. Dual Registration

A. Will applicant maintain registrations with firm(s) **not** under common ownership or control with the Sponsoring Bank named in Item 4 above?

Yes If Yes, list the firm(s) in Item 20.A on page 2.
 No

B. Will applicant maintain registration with an investment adviser **not** under common ownership or control with the Sponsoring Bank in item 4 above?

Yes If Yes, list the firm(s) in Item 20.A on page 2.
 No

10. Affiliated Firms

Not Applicable

11. Federal Banking Agency

OCC FRS FDIC

12. Registration Category Requested

Mark the registration category(ies) being requested. Qualifying examinations will be automatically scheduled if needed. If you are only scheduling or re-scheduling an exam, skip this item and complete Item 13.

IR - (S6) Investment Company and Variable Contracts Products Rep.
 GS - (S7) Full Registration/General Securities Representative

13. Complete this item only if you are scheduling or rescheduling an exam or continuing education session.

S6 S7 S101

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

The *appropriate signatory* area **DOES NOT** have to be completed **UNLESS** this page is being submitted as an amendment.

Date (MM/DD/YYYY) _____
Signature of *appropriate signatory* _____
Print or type name of *appropriate signatory* _____

CRD Use Only

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

Form U-4B
Page 2 of 15

If amending page 2, complete Items 14, 15 and items being amended.

14. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.
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PERSONAL DATA

15. Last Name (Jr., Sr., etc.)		First Name	Middle Name (Specify if none)	16. Maiden/Other Names Known By		
17. Date of Birth (MM/DD/YYYY)	State/Country of Birth	18. Sex <input type="checkbox"/> M <input type="checkbox"/> F	Height (Ft.,in.)	Weight	Hair Color	Eye Color

RESIDENTIAL HISTORY

19. Starting with current address, give all addresses for the past 5 years. Report changes only when they occur. Use the Attachment Sheet if additional space is required.

From		To		Street (Do not use a P.O. Box)	City	State/ Country	ZIP Code
Month (MM)	Year (YYYY)	Month (MM)	Year (YYYY)				
		PRESENT					

EMPLOYMENT AND PERSONAL HISTORY

20. A. Provide Complete employment history for the past 10 years, exclude the Sponsoring Bank noted in Item 4. Include all Firm(s) from Item 9. (Account for all time including full and part-time employments, self employment, military service, and homemaking. Also include statuses such as unemployed, full-time education, or travel that lasted for at least one month.) Report changes only when they occur, use Attachment Sheet if additional space is required.

From		To		Name	Investment- Related Business?	City	State/ Country	Position Held
Month (MM)	Year (YYYY)	Month (MM)	Year (YYYY)					
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO			

20. B. Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non investment-related activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt.)
 YES NO If "YES", please complete the Other Business Reporting Page of this form.

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

The appropriate signatory area DOES NOT have to be completed UNLESS this page is being submitted as an amendment.

Date (MM/DD/YYYY) _____ Signature of appropriate signatory _____
 Print or type name of appropriate signatory _____

CRD Use Only

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

If amending pages 3 and 4, complete Item 21 and items being amended.

21. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.
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If the answer to any of the following questions is "YES" and you cannot utilize the certification in Item 22N below, Attach complete details of all events or proceedings on appropriate DRP(S).

22. REFER TO THE EXPLANATION OF TERMS SECTION OF FORM U-4B INSTRUCTIONS FOR EXPLANATIONS OF ITALICIZED TERMS.

Criminal Disclosure

		YES	NO	
A. (1) Have you ever:				
(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic, foreign, or military court to any <i>felony</i> ?	1
(b) been <i>charged</i> with any <i>felony</i> ?	2
(2) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:				
(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic or foreign court to any <i>felony</i> ?	3
(b) been <i>charged</i> with any <i>felony</i> ?	4
B. (1) Have you ever:				
(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic, foreign or military court to a <i>misdemeanor involving</i> : investments or an <i>investment-related</i> business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?	5
(b) been <i>charged</i> with a <i>misdemeanor</i> specified in 22.B.(1)(a)?	6
(2) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:				
(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic or foreign court to a <i>misdemeanor</i> specified in 22.B.(1)(a)?	7
(b) been <i>charged</i> with a <i>misdemeanor</i> specified in 22.B.(1)(a)?	8

Regulatory Disciplinary Actions

C. Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever:				
(1) <i>found</i> you to have made a false statement or omission? .....	.....	.....	.....	9
(2) <i>found</i> you to have been <i>involved</i> in a violation of its regulations or statutes? .....	.....	.....	.....	10
(3) <i>found</i> you to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked, or restricted? .....	.....	.....	.....	11
(4) entered an <i>order</i> against you in connection with <i>investment-related</i> activity? .....	.....	.....	.....	12
(5) imposed a civil money penalty on you or <i>ordered</i> you to cease and desist from any activity? .....	.....	.....	.....	13
D. Has any Federal banking regulator or other Federal regulatory agency or any state regulatory agency or foreign <i>financial regulatory authority</i> ever:				
(1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical? .....	.....	.....	.....	14
(2) <i>found</i> you to have been <i>involved</i> in a violation of <i>investment-related</i> regulations(s) or statute(s)? .....	.....	.....	.....	15
(3) <i>found</i> you to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked or restricted? .....	.....	.....	.....	16
(4) entered an <i>order</i> against you in connection with <i>investment-related</i> activity? .....	.....	.....	.....	17
(5) denied, suspended, or revoked your registration or license or otherwise, by <i>order</i> , prevented you from associating with an <i>investment-related</i> business or restricted your activities? .....	.....	.....	.....	18
E. Has any <i>self-regulatory organization</i> or commodities exchange ever:				
(1) <i>found</i> you to have made a false statement or omission? .....	.....	.....	.....	19
(2) <i>found</i> you to have been <i>involved</i> in a violation of its rules (other than a violation designated as a " <i>minor rule violation</i> " under a plan approved by the U.S. Securities and Exchange Commission)? .....	.....	.....	.....	20
(3) <i>found</i> you to have been the cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked or restricted? .....	.....	.....	.....	21
(4) disciplined you by expelling or suspending you from membership, barring or suspending your association with its members, or restricting your activities? .....	.....	.....	.....	22
F. Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended? .....	.....	.....	.....	23
G. Have you been notified, in writing, that you are now the subject of any:				
(1) regulatory complaint or <i>proceeding</i> that could result in a "yes" answer to any part of 22.C, D, or E? (<i>If yes, complete the Regulatory Action Disclosure Reporting Page.</i>) .....	.....	.....	.....	24
(2) <i>investigation</i> that could result in a "yes" answer to any part of 22.A, B, C, D or E? (<i>If yes, complete the Investigation Disclosure Reporting Page.</i>) .....	.....	.....	.....	25

Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B) — continued

Form U-4B
Page 4 of 15

22. Continued

Civil Judicial Actions

- | | YES | NO | |
|---|-----|----|----|
| H. (1) Has any domestic or foreign court ever: | | | |
| (a) enjoined you in connection with any investment-related activity? | | | 26 |
| (b) found that you were involved in a violation of any investment-related statute(s) or regulation(s) | | | 27 |
| (c) dismissed, pursuant to a settlement agreement, an investment-related civil action brought against you by a state or foreign financial regulatory authority? | | | 28 |
| (2) Are you named in any pending investment-related civil action that could result in a "yes" answer to any part of 22.H(1)? | | | 29 |

Customer Complaints

- | | | | |
|--|--|--|----|
| I. Have you ever been the subject of an investment-related, consumer initiated complaint or proceeding that: | | | |
| (1) alleged compensatory damages of \$10,000 or more, fraud, or wrongful taking of property? | | | 30 |
| (2) was settled or decided against you for \$5,000 or more, or found fraud or the wrongful taking of property? | | | 31 |

Terminations

- | | | | |
|---|--|--|----|
| J. Have you ever voluntarily resigned, been discharged or permitted to resign after allegations were made that accused you of: | | | |
| (1) violating investment-related statutes, regulations, rules, or industry standards of conduct? | | | 32 |
| (2) fraud or the wrongful taking of property? | | | 33 |
| (3) failure to supervise in connection with investment-related statutes, regulations, rules or industry standards of conduct? | | | 34 |

Financial

- | | | | |
|---|--|--|----|
| K. Within the past 10 years: | | | |
| (1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? | | | 11 |
| (2) based upon events that occurred while you exercised control over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? | | | 35 |
| (3) based upon events that occurred while you exercised control over it, has a broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act? | | | 36 |
| L. Has a bonding company ever denied, paid out on, or revoked a bond for you? | | | 37 |
| M. Do you have any unsatisfied judgments or liens against you? | | | 38 |
| | | | 39 |

DISCLOSURE CERTIFICATION (OPTIONAL)

You may only certify to the accuracy and completeness of the disclosure information in your file if it has been fully provided in DRP format. If DRP(s) are not on file, do not answer these certification boxes. Provide full details of all matters on DRP(s). All appropriate questions in Item 22 must be answered, regardless of whether the certification is being utilized. Refer to the Form U-4B instructions for additional information on the utilization of the certification language.

- | | | | |
|--|--|--|----|
| N. I have received a copy of my disclosure file taken from the CRD system, I acknowledge that all information contained therein is fully disclosed, accurate and in DRP format. I further certify the following: | | | |
| (1) I have no new information to add to my disclosure file | | | 40 |
| (2) I have new information to add to my disclosure file which is reported on the appropriate DRP(s) | | | 41 |
| (3) I have updated information, reported on the appropriate DRP(s), which was previously reported | | | 42 |

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

The applicant and appropriate signatory area DOES NOT have to be completed UNLESS this page is being submitted as an amendment.

Date (MM/DD/YYYY) Signature of applicant

Print or type name of applicant

Date (MM/DD/YYYY) Signature of appropriate signatory

Print or type name of appropriate signatory

CRD Use Only

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B) — continued**

 Form U-4B
 Page 5 of 15

21. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.
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PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

APPLICANT AFFIRMATION:

1. I swear or affirm that I have read and understand the items and instructions on this form and that my answers (including attachments) are true and complete to the best of my knowledge. I understand that I am subject to administrative, civil and/or criminal penalties if I give false or misleading answers.
2. I apply for registration with the Federal Banking Agency indicated in Item 11.
3. I authorize all my employers and any other person to furnish to any Federal Banking Agency, jurisdiction, SRO, employer, prospective employer, or any agent acting on its behalf, any information they have, including my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former employers, complete reasons for my termination. Moreover, I release each employer, former employer, and each other person from any and all liability, of whatever nature, by reason of furnishing any of the above information, including information reported on the Uniform Termination Notice for Bank Securities Representatives Registration (Form U-5B). I recognize that I may be the subject of any investigative consumer report and waive any requirement of notification with respect to any investigative consumer report ordered by any Federal Banking Agency, jurisdiction, SRO, employer or prospective employer of the nature and scope of the requested investigative consumer report.
4. I authorize the Federal Banking Agency to give any information on the Central Registration Depository to any employer or prospective employer, any federal, state or municipal agency, or any other SRO and I release the Federal Banking Agency and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
5. I authorize the Federal Banking Agency and any person acting on their behalf to give certain information on the Central Registration Depository concerning me to any person, including the general public. I specifically authorize the release of information regarding my name, CRD #, employment and personal history, and registration categories to any person. In addition, I specifically authorize the release of information regarding criminal and civil actions as well as consumer complaints (both resolved and unresolved), terminations and certain financial disclosure information to any person. I understand the Federal Banking Agency will not disclose social security numbers, residential information, date and location of birth, or gender, but will release all other information in the Central Registration Depository to any person. I release the Federal Banking Agency and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information to any person.
6. I understand and certify that the representations in this form apply to all employers with whom I seek registration as indicated in Item 4 of the form. I agree to update this form by causing an amendment to be filed within 30 days of the event occurring which causes any information to become incomplete, misleading or inaccurate. Further, I represent that, to the extent any information previously submitted is not amended, the information provided in this form is currently accurate and complete.
7. I authorize any employer or prospective employer to file on my behalf any information required in this form or any amendment thereto; I certify that I have reviewed and approved the information to be submitted to any Federal Banking Agency on this Form U-4B application; I agree that I will review and approve all disclosure information that will be filed on my behalf; I further agree to waive any objection to the admissibility of the filed records in any criminal, civil, or administrative proceeding.

(All applicants must execute this page.)

Date (MM/DD/YYYY)

Signature of Applicant

Print or type name of Applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**Form U-4B
Page 6 of 15

21. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.
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PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

THE SPONSORING BANK MUST COMPLETE THE FOLLOWING:

To the best of my knowledge and belief, the applicant is currently bonded where required, and, at the time of approval, will be familiar with the statutes, rules, regulations, policies and supervisory guidance, and by-laws of the appropriate Federal banking agency with which this application is being filed, and the rules governing bank securities representatives, and will be fully qualified for the position for which application is being made herein. I agree that I will not permit the applicant to act as a bank securities representative without first receiving the approval of the appropriate Federal banking agency.

This Sponsoring Bank has communicated with all of the applicant's previous employers for the past three years and has documentation on file with the names of the persons contacted and the date of contact. In addition, I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application.

I have provided the applicant an opportunity to review the information contained herein and the applicant has approved this information and signed the Form U-4B.

The appropriate signatory area must be completed on all initial or amendment filings.

Date (MM/DD/YYYY)

Signature of appropriate signatory

Print or type name of appropriate signatory

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

 Form U-4B
Page 7 of 15

OTHER BUSINESS DISCLOSURE REPORTING PAGE
GENERAL INSTRUCTIONS

 This Other Business Disclosure Reporting Page (DRP U-4B) is an INITIAL *OR* AMENDED response used to report details in support of affirmative responses to *Item 20.B* on Page 2 of the Form U-4B.

20.B. Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent, or otherwise? (Please exclude non investment-related activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt.)

Please provide the following information relevant to each other business disclosed.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Applicant's SSN	Sponsoring Bank CRD No.
1. Name of Other Business		Investment-Related Business? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Address of Other Business (Street, City, State/Country, ZIP Code)		
3. Nature of Other Business		
4. Your Position, Title or Relationship with Other Business	5. Start Date (MM/DD/YYYY)	End Date (MM/DD/YYYY)
6. Your Obligation to Other Business		
Approximate Number of Hours/Month:		How many during securities trading hours/month?
7. Briefly describe your duties relating to other business		

1. Name of Other Business		Investment-Related Business? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Address of Other Business (Street, City, State/Country, ZIP Code)		
3. Nature of Other Business		
4. Your Position, Title or Relationship with Other Business	5. Start Date (MM/DD/YYYY)	End Date (MM/DD/YYYY)
6. Your Obligation to Other Business		
Approximate Number of Hours/Month:		How many during securities trading hours/month?
7. Briefly describe your duties relating to other business		

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

Form U-4B
Page 8 of 15

CRIMINAL DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to **Items 22.A and 22.B** on Page 3 of the Form U-4B.

Check item(s) you are responding to:

22. A. (1) Have you ever:

- (a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic, foreign, or military court to any *felony*?
- (b) been charged with any *felony*?

(2) Based upon activities that occurred while you exercised *control* over it, has an organization ever:

- (a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic or foreign court to any *felony*?
- (b) been charged with any *felony*?

22. B. (1) Have you ever:

- (a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic, foreign or military court to a *misdemeanor involving: investments or an investment-related business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?*
- (b) been charged with a *misdemeanor* specified in 22.B.(1)(a)?

(2) Based upon activities that occurred while you exercised *control* over it, has an organization ever:

- (a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic or foreign court to a *misdemeanor* specified in 22.B.(1)(a)?
- (b) been charged with a *misdemeanor* specified in 22.B.(1)(a)?

Use the DRP to report all charges arising out of the same event. One event may result in more than one affirmative answer to the above items. Multiple counts of the same charge arising out of the same event(s) should be reported on the same DRP. Unrelated criminal actions, including separate cases arising out of the same event, must be reported on separate DRPs.

Applicable court document (i.e., criminal complaint, information or indictment as well as judgment of conviction or sentencing documents) must be provided to the CRD if not previously submitted.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.

1. If charge(s) were brought against an organization over which you exercise(d) control:

Organization Name	Investment-Related Business? <input type="checkbox"/> Yes <input type="checkbox"/> No	Your Position, Title, or Relationship
-------------------	--	---------------------------------------

2. Formal charge(s) were brought in:

Court (Name of Federal Military, State or Foreign Court)	Location of Court (City or County and State or Country)	Docket/Case Number
--	---	--------------------

3. Charge Detail Disclosure: (Continue on additional Criminal Disclosure Reporting Page U-4B if more than three charges arise out of the same event.)

Chg#	Formal Charge(s) Description	Charge Date (MM/DD/YYYY)	Number of Counts	Charge Type (check one only)		Plea (Guilty, Not Guilty, etc.)	Charge is Currently (check one only)	Appeal Date (MM/DD/YYYY)	Product Type (if charge is investment-related)
				Misdemeanor	Felony				
1.							<input type="checkbox"/> Pending <input type="checkbox"/> Final <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-Trial Intervention		
2.							<input type="checkbox"/> Pending <input type="checkbox"/> Final <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-Trial Intervention		
3.							<input type="checkbox"/> Pending <input type="checkbox"/> Final <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-Trial Intervention		

IF FINAL, ON APPEAL, OR PRE-TRIAL INTERVENTION, COMPLETE ITEMS 4 AND 5. FOR EACH CHARGE THAT IS PENDING, COMPLETE ONLY ITEM 4.

4. Disposition Detail Disclosure: (Continue on another Criminal Disclosure Reporting Page U-4B if more than three charges.)

Chg#	Disposition Type: (Convicted, Acquitted, Dismissed, Pre-Trial Intervention, etc.)	Disposition Date (MM/DD/YYYY)	Disposition Detail Sentence/Penalty (if applicable)	Duration (if sentence, suspension, probation, etc.)	Start Date (MM/DD/YYYY)	Penalty/Fine Amount (if applicable)	Date Paid (MM/DD/YYYY)
1.							
2.							
3.							

5. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which was subject of the charge(s) occurred. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of applicant

Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B) - continued

Form U-4B Page 9 of 15

REGULATORY REPORTING DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to items 22.C, 22.D, 22.E, 22.F and 22.G(1) on Page 3 of the Form U-4B.

Check item(s) you are responding to: 22. C. Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever: (1) found you to have made a false statement or omission? (2) found you to have been involved in a violation of its regulations or statutes? (3) found you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted? (4) entered an order against you in connection with investment-related activity? (5) imposed a civil money penalty on you or ordered you to cease and desist from any activity? D. Has any Federal banking agency or other Federal regulatory agency or any state regulatory agency or foreign financial regulatory authority ever: (1) found you to have made a false statement or omission or been dishonest, unfair or unethical? (2) found you to have been involved in a violation of investment-related regulations(s) or statute(s)? (3) found you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted? (4) entered an order against you in connection with investment-related activity? (5) denied, suspended, or revoked your registration or license or otherwise, by order, prevented you from associating with an investment-related business or restricted your activities? E. Has any self-regulatory organization or commodities exchange ever: (1) found you to have made a false statement or omission? (2) found you to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the U.S. Securities and Exchange Commission)? (3) found you to have been the cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted? (4) disciplined you by expelling or suspending you from membership, barring or suspending your association with its members, or restricting your activities? F. Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended? G. Have you been notified, in writing, that you are now the subject of any: (1) regulatory complaint or proceeding that could result in a "yes" answer to any part of 22.C, D, or E? (If this matter has not yet reached a formal pending action, complete the Investigation Disclosure Reporting Page.)

One event may result in more than one affirmative answer within each of the above items. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.)) Applicant's CRD No. Social Security No. Sponsoring Bank CRD No. 1. Regulatory Action Initiated by (Name the regulator, foreign financial regulatory authority, SRO or commodities exchange, etc.) 2. Regulatory Action Type 3. Date Initiated (MM/DD/YYYY) 4. Docket/Case Number 5. Employing Firm when events occurred 6. Product Type(s) 7. Describe the allegations related to this regulatory action (Use reverse side of this sheet for additional comments if necessary.) 8. Is regulatory action currently (check one) Pending On Appeal Final 9. If on appeal, regulatory action appealed to (SEC, SRO, U.S. Court of Appeals, etc.) 10. If on appeal, date filed (MM/DD/YYYY) IF FINAL OR ON APPEAL, COMPLETE ALL ITEMS BELOW. FOR PENDING ACTIONS, COMPLETE ITEM 19 ONLY. 11. How was the matter resolved? (Settled, Consent, etc.) 12. Resolution Date (MM/DD/YYYY) 13. Sanctions (Suspended, Censured, Barred, Requalification, etc.) 14. If Suspended, Enjoined or Barred: Is suspension/injunction/bar of a fixed duration? Yes No Suspension/Injunction Bar Start Date (MM/DD/YYYY) Suspension/Injunction Bar Duration Suspension/Injunction/Bar capacity affected (General Securities Principal, Financial, & Operations Principal, etc.) 15. If requalification by exam/retraining was a condition of the sanction: Is requalification/retraining time-related? Yes No If yes, length of time given to requalify/retrain: (If No, provide details in Item 19) Type of exam required for requalification Has condition been satisfied? Yes No 16. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation: (Fill in amount and MM/DD/YYYY in appropriate box) Penalty/Fine \$ Date Paid Restitution \$ Date Paid Disgorgement \$ Date Paid Other \$ Date Paid 17. Were you required to pay any part of the monetary items disclosed in 16: Yes No (if yes, fill in amount and MM/DD/YYYY in appropriate box) Penalty/Fine \$ Date Paid Restitution \$ Date Paid Disgorgement \$ Date Paid Other \$ Date Paid 18. Was payment of all or any part of a monetary award, penalty or fine waived? Yes No If yes, provide details of Waiver in 19 below. 19. Provide summary of details related to the action status and/or disposition and include relevant terms, conditions and dates. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

Form U-4B
Page 10 of 15

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to *Item 22.H* on Page 4 of the Form U-4B.

Check <input type="checkbox"/> item(s) you are responding to: 22.H.(1) Has any domestic or foreign court ever: <input type="checkbox"/> (a) <i>enjoined</i> you in connection with any <i>investment-related</i> activity? <input type="checkbox"/> (b) <i>found</i> that you were <i>involved</i> in a violation of any <i>investment-related</i> statute(s) or regulation(s) <input type="checkbox"/> (c) <i>dismissed</i> , pursuant to a settlement agreement, an <i>investment-related</i> civil action brought against you by a state or <i>foreign financial regulatory authority</i> ? (2) <input type="checkbox"/> Are you named in any pending <i>investment-related</i> civil action that could result in a "yes" answer to any part of 22.H.(1)?

One event may result in more than one affirmative answer within each of the above items. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))			
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.	
1. Court Action Initiated by (Name the regulator, foreign financial regulatory authority, SRO commodities exchange, Agency, Firm, Private Plaintiff, etc.)			
2. Relief Sought (Temporary Restraining Order, Mandatory Injunction, Preliminary Injunction, etc.)		3. Filing Date of Court Action (MM/DD/YYYY)	
4. Product Type(s)			
5. Court formal action was brought in (Name of Federal, Military, State or Foreign Court)			
6. Location of Court (City or County and State or Country)		7. Docket/Case Number	
8. Employing Firm when events occurred			
9. Describe the allegations related to this court action (Use reverse side of this sheet for additional comments if necessary.)			
10. Is action currently (check one) <input type="checkbox"/> Pending <input type="checkbox"/> On Appeal <input type="checkbox"/> Final	11. If pending, date notice was served (MM/DD/YYYY)	12. If on appeal, action appealed to (provide name of court)	13. If on appeal, date filed (MM/DD/YYYY)

IF FINAL OR ON APPEAL, COMPLETE ALL ITEMS BELOW. FOR PENDING ACTIONS, COMPLETE ITEM 19 ONLY.

14. How was the matter resolved? (Settled, Consent, Judgment Rendered, etc.)	15. Resolution Date (MM/DD/YYYY)	16. Sanctions (Suspended, Censured, etc.)
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17. If Suspended, Enjoined or Barred:

Is suspension/injunction/bar of a fixed duration? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, provide details in Item 21)	Suspension/Injunction Bar Start Date (MM/DD/YYYY)	Suspension/Injunction Bar Duration	Suspension/Injunction/Bar capacity affected (General Securities Principal, Financial, & Operations Principal, etc.)
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18. If requalification by exam is/was a condition of the disposition:

Is requalification time-related? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, length of time given to requalify (if No, provide details in Item 21)	Type of exam required for requalification	Has condition been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No
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19. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation: (Fill in amount and MM/DD/YYYY in appropriate box)

Penalty/Fine \$	Date Paid	Restitution \$	Date Paid	Disgorgement \$	Date Paid	Other \$	Date Paid
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20. Were you required to pay any part of the monetary items disclosed in 19: Yes No (if yes, fill in amount and MM/DD/YYYY in appropriate box)

Penalty/Fine \$	Date Paid	Restitution \$	Date Paid	Disgorgement \$	Date Paid	Other \$	Date Paid
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21. Provide a brief summary of circumstances related to the action(s), allegation(s), disposition(s) and/or finding(s) disclosed above. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

 Form U-4B
Page 11 of 15

CUSTOMER COMPLAINT DISCLOSURE REPORTING PAGE
GENERAL INSTRUCTIONS

 This Disclosure Reporting Page (DRP U-4B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to *Item 22.f* on Page 4 of the Form U-4B.

 Check item(s) you are responding to:

22.1. Have you ever been the subject of an *investment-related*, consumer initiated complaint or proceeding that:

- (1) alleged compensatory damages of \$10,000 or more, fraud, or wrongful taking of property?
 (2) was settled or decided against you for \$5,000 or more, or *found* fraud or the wrongful taking of property?

One event may result in more than one affirmative answer to the above items; use only one DRP to report all the details related to one customer complaint. Use a separate DRP for each customer complaint.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.
1. Customer Name(s)		2. Customer's State(s) of Residence (2-Letter Abbreviation)
3. Employing Firm or Sponsoring Bank when events giving rise to the complaint occurred		4. Date complaint was received (MM/DD/YYYY)
5. Allegation(s)		
6. Provide a brief summary of events related to the allegation(s) including dates when activities leading to the allegation(s) occurred		
7. Product Type(s)		8. Alleged Compensatory Damage Amount \$
9. Is complaint currently pending <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, how was complaint resolved (No Action, Withdrawn, Denied, Settled, Arbitrated, Litigated, CFTC Reparation, etc.)	If No Action, Denied, or Withdrawn, give date (MM/DD/YYYY)

IF STATUS IS SETTLED, ANSWER 10 AND 13; IF ARBITRATED OR CFTC REPARATION, ANSWER 11 AND 13; IF LITIGATED, ANSWER 12 AND 13.
10. If SETTLED by you, or on your behalf, without Arbitration, Litigation or Reparation:

Settlement Date (MM/DD/YYYY)	Settlement Amount \$	Your Contribution \$
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11. If ARBITRATED or CFTC REPARATION:

Arbitration/Reparation Claim was filed with (NASD, AAA, NYSE, CBOE, CFTC, etc.)		Date You Received Service (MM/DD/YYYY)
Case/Docket Number	Is Arbitration/Reparation currently pending? <input type="checkbox"/> Yes <input type="checkbox"/> No	

If Status if FINAL:

Disposition (Settled, Dismissed, Award, Withdrawn, etc.)	Date of Disposition (MM/DD/YYYY)
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If disposition resulted in monetary compensation:

Award Amount \$	Settlement Amount \$	Reparation Amount \$	Your Contribution \$	Date Paid (MM/DD/YYYY)
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12. If CIVIL LITIGATION:

Court that case was filed in (Name of Federal, State or Foreign Court)	Location of Court (City or County and State or Country)	Docket/Case Number
Is Civil Litigation currently pending? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date You Received Service (MM/DD/YYYY)

If Status if FINAL:

Disposition (Settled, Dismissed, Judgment, Withdrawn, etc.)	Date of Disposition (MM/DD/YYYY)
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If disposition resulted in monetary compensation:

Judgment Amount \$	Restitution Amount \$	Settlement Amount \$	Your Contribution \$	Date Paid (MM/DD/YYYY)
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Is action currently on appeal? <input type="checkbox"/> Yes <input type="checkbox"/> No	If on appeal, date filed (MM/DD/YYYY)
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13. Provide details as to any other limits or conditions to disposition. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

Form U-4B
Page 12 of 15

INVESTIGATION DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-4B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to *Item 22.G* on Page 3 of the Form U-4B.

22. G. (2) Have you been notified, in writing, that you are now the subject of any *investigation* that could result in a "yes" answer to any part of 22.A, B, C, D or E?

Complete this DRP only if you are answering "yes" to Item 22.G.(2). If you answered "yes" to Item 22.G.(1), complete the Regulatory Action DRP. If you have been notified that the *investigation* has been concluded without formal action, complete items 1, 2, 3 and 4 of this DRP to update. One event may result in more than one *investigation*. If more than one authority is investigating you, use a separate DRP to provide details.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))

Applicant's CRD No.

Social Security No.

Sponsoring Bank CRD No.

1. Notice received from (Name of Regulator, Agency, SRO, etc. initiating the investigation)

2. Notice date (MM/DD/YYYY)

3. Describe briefly the nature of the investigation, if known, or details of the resolution (Use reverse side of this sheet for additional comments if necessary.)

4. Date Resolved (MM/DD/YYYY)

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B) — continued**

Form U-4B
Page 13 of 15

TERMINATION DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-4B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to *Item 22.J* on Page 4 of the Form U-4B.

<p>Check <input type="checkbox"/> item(s) you are responding to:</p> <p>22. J. Have you ever voluntarily <i>resigned</i>, been discharged or permitted to <i>resign</i> after allegations were made that accused you of:</p> <p><input type="checkbox"/> (1) violating <i>investment-related</i> statutes, regulations, rules, or industry standards of conduct?</p> <p><input type="checkbox"/> (2) fraud or the wrongful taking of property?</p> <p><input type="checkbox"/> (3) failure to supervise in connection with <i>investment-related</i> statutes, regulations, rules or industry standards of conduct?</p>
--

One event may result in more than one affirmative answer to the above items. Use only one DRP to report details related to the same termination. Use a separate DRP for each termination reported.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.
1. Firm Name		
2. Termination Type (Discharged, Permitted to Resign, Voluntary, Other)		3. Termination date (MM/DD/YYYY)
4. Allegation Type (Excessive trading activity, misrepresentation, failure to supervise, etc.)		
5. Product Type(s)		
6. Describe circumstances relating to termination. Include event dates and facts to sufficiently describe conduct leading to termination. (Use reverse side of this sheet for additional comments if necessary.)		

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

Form U-4B
Page 14 of 15

FINANCIAL DISCLOSURE REPORTING PAGE 1

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to *Items 22.K.(1), 22.K.(2), and 22.K.(3)* on Page 4 of the Form U-4B.

Check <input type="checkbox"/> Item(s) you are responding to: 22. K. Within the past 10 years: <input type="checkbox"/> (1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? (Please fill out SECTION I below.) <input type="checkbox"/> (2) based upon events that occurred while you exercised <i>control</i> over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? (Please fill out SECTION I below.) <input type="checkbox"/> (3) based upon events that occurred while you exercised <i>control</i> over it, has a broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act? (Please fill out SECTION II below.)
--

If events result in affirmative answers to both 22.K.(1) and 22.K.(2), details to each must be provided on separate DRPs. You must complete Section I and/or Section II as well as Item 18 to complete this DRP.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.

SECTION I

If within the past 10 years you have made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition or; if within the past 10 years based upon events that occurred while you exercised control over it, an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition:

1. Action Type (Compromise, Bankruptcy, Declaration, etc.)	2. Action Date (MM/DD/YYYY)
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If the financial action relates to an organization over which you exercise(d) control:

3. Organization Name	4. Investment-Related Business? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Your Position, Title, Relationship (if applicable)
6. Court (Name of Federal, State, or Foreign Court)		7. Location of Court (City or County and State or Country)
8. Docket/Case Number	9. Chapter Number (If Federal Bankruptcy Filing)	10. Is action currently pending? <input type="checkbox"/> Yes <input type="checkbox"/> No
11. Disposition Type (Discharged, Released, Dismissed, etc.)		12. Disposition Date (MM/DD/YYYY)
13. Provide brief summary of events leading to action. If not dismissed or closed, explain (Use reverse side of this sheet for additional comments if necessary.)		

SECTION II

If within the past 10 years based upon events that occurred while you exercised control over it, a broker or dealer has been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act:

1. Action Type (Compromise, Bankruptcy, Declaration, etc.)	2. Action Date (MM/DD/YYYY)
3. Organization Name	4. Your Position, Title, Relationship (if applicable)
5. Court (Name of Federal, State, or Foreign Court)	
6. Location of Court (City or County and State or Country)	
7. Docket/Case Number	8. Chapter Number (If Federal Bankruptcy Filing)
9. Is action currently pending? <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Disposition Type (Discharged, Released, Dismissed, etc.)	11. Disposition Date (MM/DD/YYYY)
12. Provide brief summary of events leading to action. If not dismissed or closed, explain (Use reverse side of this sheet for additional comments if necessary.)	

If a SIPA trustee was appointed, complete Items 13, 16, and 17. If a direct payment procedure was begun, complete Items 13, 14, and 15.

13. Currently Open? <input type="checkbox"/> Yes <input type="checkbox"/> No	14. The amount paid or agreed to be paid by you \$	15. Date Initiated or Filed (MM/DD/YYYY)
16. Trustee Name		17. Trustee Appointment Date (MM/DD/YYYY)

18. Please provide details as to any status disposition. Include details as to creditors, terms, conditions, amounts due and settlement schedule (if applicable). (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of applicant

**Uniform Application for Bank Securities Representative Registration or Transfer
(Form U-4B)—continued**

 Form U-4B
 Page 15 of 15

FINANCIAL DISCLOSURE REPORTING PAGE 2
GENERAL INSTRUCTIONS

 This Disclosure Reporting Page (DRP U-4B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to *Items 22.L and 22.M* on Page 4 of the Form U-4B.

 Check item(s) you are responding to:

22. L. Has a bonding company ever denied, paid out on, or revoked a bond for you? (Please fill out SECTION I below.)
 M. Do you have any unsatisfied judgments on liens against you? (Please fill out SECTION II below.)

If multiple, unrelated events result in the same affirmative answer, details must be provided on separate DRPs.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.

SECTION I

If a bonding company ever denied, paid out on, or revoked a bond for you:

1. Firm Name (Policyholder)	
2. Bonding Company Name	
3. Disposition Type (Denied, Revoked, Payout)	4. Disposition Date (MM/DD/YYYY)
5. If disposition resulted in Payout:	
Payout Amount \$	Date Paid (MM/DD/YYYY)
6. Summarize details of circumstances leading to the necessity of the bonding company action.	

SECTION II

If you have an unsatisfied judgment or lien: (Disclose details for only one judgment or lien per DRP.) When you satisfy or otherwise dispose of this judgment or lien, amend the Form U-4B Page 4 and this section to report the outcome.

1. Judgment/Lien Amount	2. Judgment or Lien Holder	
3. Judgment/Lien Type (Tax, Civil, Default, Liquidated Damages, etc.)	4. Date Filed MM/DD/YYYY	
5. Is Judgment/Lien Outstanding? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, provide status date (MM/DD/YYYY)	If No, how was matter resolved? (Released, Discharged, Removed, Satisfied)
6. Court (Name of Federal, State or Foreign Court)	7. Location of Court (City or County and State or Country)	8. Docket/Case Number
9. Provide brief summary of events leading to the action and any payment schedule details including current status (if applicable) (Use reverse side of this sheet for additional comments if necessary.)		

Date (MM/DD/YYYY)

Signature of applicant

OMB No. xxxx-xxxx (OCC) Expires x/xx/xx
xxxx-xxxx (FDIC) Expires x/xx/xx
7100-0281 (FRS) Expires x/xx/xx
Average hours per response: x.xx

Form U-5B

Uniform Termination Notice
for
Bank Securities Representative
Registration

FORM U-5B

UNIFORM TERMINATION NOTICE FOR BANK SECURITIES REPRESENTATIVE REGISTRATION

Public reporting burden for this information collection is estimated to vary from X.X to X,XXX hours per response, with an average of XX.XX hours per response, including time to gather and maintain data in the required form and to review instructions and complete the information collection. Comments regarding this burden estimated or any other aspect of this information collection, including suggestions for reducing the burden, may be sent to:

Secretary
Board of Governors of the Federal Reserve System
20th and C Streets, NW
Washington, DC 20551

and

Office of Management and Budget
Paperwork Reduction Project (7100-0XXX)
Washington, DC 20503.

GENERAL INSTRUCTIONS

The Form U-5B is the Uniform Termination Notice for Bank Securities Representative Registration. The form is similar, but not identical, to the Form U-5 used by broker-dealers, investment advisers, and issuers of securities to terminate registration of an individual in the various self-regulatory organizations and jurisdictions. These instructions apply to filing Form U-5B with the Federal Banking Agencies.

Items 1–18 must be answered and all fields requiring a response must be completed before the filing is accepted. Enter "none" or "N/A" (not applicable) where appropriate.

Use the Disclosure Reporting Page(s) (DRPs U-5B) to provide details to "yes" answers to items 14–18. Although

documents are not required with the DRP (U-5B), you may wish to include them as the appropriate Federal banking agency may request them as part of the review process.

Former Bank Securities Representatives are under the continuing jurisdiction of the Federal banking regulators and may have to provide information about their activities while associated with the Sponsoring bank. Individuals are required to forward any residential address changes—item 8—for two years following termination or last Form U-5B filing.

Sponsoring Banks have a continuing obligation to amend and update items 14–18 until final disposition, reportable matters that occur and become known after initial submission of this form. A paper copy, with an original manual signature, of the Form U-5B and amendments to Disclosure Reporting Page (DRPs U-5B) may be required to be retained by the filing Sponsoring Bank and may be required to be made available for inspection upon regulatory request.

Amendments to items other than 5 and 14–18 are prohibited.

To amend items 14–18, complete only items 1–4 and the item(s) being amended. If additional information relates to the amendment, submit the details on fully completed DRPs (U-5B).

The Federal banking agency's mailing address for questions and correspondence is:

Federal Deposit Insurance Corporation,
The Board of Governors of the Federal Reserve System,
and
Office of the Comptroller of the Currency
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

EXPLANATION OF TERMS

The following terms are italicized throughout this form.

For purposes of filing this Form U-5B:

The term **Federal Banking Agency** means the Federal Deposit Insurance Corporation for state nonmember banks, the Board of Governors of the Federal Reserve System for state member banks, and the Office of the Comptroller of the Currency, Department of the Treasury for national banks.

The term **Bank Securities Representative** means an employee of a Sponsoring Bank who is, or was, engaged in the solicitation recommendation purchase or sale of certain securities to retail bank customers.

The term **Sponsoring Bank** means a state or nationally chartered bank which is using the bank exemption in the Securities Exchange Act of 1934, as amended, to solicit, recommend, purchase or sell certain securities through Bank Securities Representatives to retail bank customers.

The term **Jurisdiction** means a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

The term **Self-Regulatory Organization ("SRO")** means any national securities and commodities exchange, any national securities association (e.g., the NASD), or any registered clearing agency.

The term **Full Termination** means the termination of registration with the appropriate Federal banking agency.

For purposes of item 9:

The term **Misdemeanor**, for jurisdictions that do not differentiate between a felony or misdemeanor, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

The term **Investment-Related** pertains to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, investment company, investment banker, futures sponsor, bank, or savings association). Such term specifically includes actions taken by the Federal banking agencies pursuant to Sections 8 and 19 of the Federal Deposit Insurance Act. 12 U.S.C. § 1818 and 1829.

The term **Appropriate Signatory** means the individual designated by the Sponsoring bank who is authorized to execute Form U-5B on its behalf. Such individual must meet the criteria, if any, for acting as the "appropriate signatory" as established by the appropriate Federal banking agency.

For purposes of item 15 and the corresponding DRP (U-5B):

The term **Involved** means doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

The term **Disciplinary Action** includes a formal action such as a denial, revocation or suspension of a registration, or a censure, fine, cease and desist order, order of prohibition, temporary restraining order, injunction, bar or expulsion, but does not include a minor rule violation, deficiency letter, examination report, memorandum of understanding, letter of caution, admonishment, and similar informal resolutions or matters.

The term **Foreign Financial Regulatory Authority** includes a foreign securities authority; any other governmental body or foreign equivalent or a self-regulatory organization empowered by a foreign government to administer or enforce its laws relating to the regulation of investment or investment-related activities; or a membership organization a function of which is to regulate the participation of its members in the activities listed above.

For purposes of item 12:

The term **Date Terminated** means the effective date of the termination of the registration or, in the case where registration has not yet been made effective, the date the withdrawal of the application for registration.

For purposes of item 14 and the corresponding DRP (U-5B):

The term **Charged** means being accused of a crime in a formal complaint, information, or indictment, (or equivalent formal charge).

The term **Felony**, for jurisdictions that do not differentiate between a felony or misdemeanor, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

A **Minor Rule Violation** is a violation of a self-regulatory organization rule which has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate self-regulatory organization to determine if a particular rule violation has been designated as "minor" for these purposes.

For the purposes of Item 16 and the corresponding DRP (U-5B):

The term **Investigation** includes grand jury investigations, U.S. Securities and Exchange Commission investigations after the "Wells" notice has been given, formal investigations by SROs

or actions or procedures designated as investigations by jurisdictions, but does not include subpoenas, preliminary or routine regulatory inquiries or requests for information, deficiency letters, "blue sheet" requests or other trading questionnaires, or examinations.

The term **Proceeding** includes a formal administrative or civil action initiated by a Federal Banking Agency, governmental agency, self-regulatory organization or foreign financial regulatory authority, a felony criminal indictment or information (or equivalent formal charge), or a misdemeanor criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal criminal indictment or information (or equivalent formal charge).

SPECIFIC INSTRUCTIONS

1. Last Name. The applicant's last name will include punctuation(s) when and where appropriate. An entry is required for processing initial and amended Form U-5B filings.

First Name. Do not use nicknames, abbreviations, or modifications to the applicant's first name. An entry is required for processing initial and amended Form U-5B filings.

Middle Name. If the applicant does not have a middle name specify "NONE". Do not leave this field blank. Do not include nicknames, abbreviations, or modifications to the applicant's middle name. This term is required for processing initial and amended Form U-5B filings.

2. Applicant's CRD #. The Applicant's CRD number is assigned to the applicant by the Federal banking agencies through the Central Registration Depository (CRD) system. It is not necessary to include leading zeros.

Applicant's SS #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-5B.

3. Sponsoring Bank or Issuer Name. This is the Sponsoring Bank's complete name as listed on Form SB, or the issuer's complete name. Do not abbreviate, shorten, or modify the name. An entry is required in this field for processing the initial and amended Form U-5B filings.

4. Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. An entry is required in this field for processing the initial and amended Form U-5B filings.

5. Office of Employment Address. Not applicable for Form U-5B filings.

6. CRD Branch #. Not applicable for Form U-5B filings.

7. Billing Code. The Billing Code is an alpha/numeric value consisting of up to eight characters. It is the responsibility of the Sponsoring Bank to establish and maintain its own set of unique billing codes. If your Sponsoring Bank does not use CRD billing codes, leave this field blank. This is not a required field.

8. Street. This item is used to capture the physical location of the applicant's residence. Post office boxes are not acceptable. Include street name, building #, unit #, apartment #, suite #, slip #, etc. The applicant is required to update the information for two years after leaving the industry.

City. This item is used to capture the name of the city in which the applicant is currently residing. This is a required field for all address history.

State/Country. This item identifies the state code where the applicant resides or resided in the past. Enter the two digit state abbreviation for the street address provided above. If this is a foreign address indicate the country.

ZIP/Postal Code. Enter the applicant's residence nine digit ZIP Code or postal code if a foreign address.

9. Affiliated Firms. Not applicable for Form U-5B filings.

10. Full Termination. A "Yes" response will terminate the Bank Securities Representative's registration with the appropriate Federal banking agency.

11. Federal Banking Agency Termination. Check the appropriate Federal Banking agency box with which the individual is terminating registration categories.

12. Date Terminated. Enter the actual date the termination of registration is effective. The month, day and year are required.

13. Reason for Termination. Check the appropriate box. If "Permitted to Resign", "Discharged", or "Other" are checked, provide an explanation.

14.-18. Disclosure. Check the appropriate "Yes" or "No" response for each question. Refer to the Explanation of Terms at the front of these instructions. Complete details explaining any "Yes" answers must be provided on the appropriate Disclosure Reporting Pages (DRP U-5):

- 14 Criminal Disclosure
- 15 Regulatory Action Disclosure
- 16 Investigation/Internal Review Disclosure
- 17 Customer Complaint Disclosure
- 18 Investigation/Internal Review Disclosure

18. Internal Review. Generally, this item is used to report matters of a compliance nature, BUT NOT matters of a competitive nature. Responses should not include situations relating to disputes between the firm and the individual over ownership or possession of information or records pertaining to business conducted by the individual.

If answered "Yes," the individual named in item 1 of this form is afforded the opportunity to respond by using Part II of the Investigation/Internal Review Disclosure Reporting Page (U-5B).

19. Disclosure Certification (Optional). This certification language contained in item 19 allows the firm to certify that all disclosable information on the individual's record has been previously reported on DRPs (U-4B) or DRPs (U-5B). Firms that have not filed DRPs (U-4B and DRPs (U-5B) for all disclosable information may not take advantage of the certification option. Use of the certification is optional, and, if chosen, "Yes" answers to the appropriate questions in Items 14–18 must be provided.

Signatory Area

"Signature" includes a manual signature or an electronically transmitted equivalent.

Date. This date represents the date the form was signed by the appropriate signatory. The correct format for the date entry is "MM/DD/YYYY."

Signature of Appropriate Signatory. A signatory entry is required for all filings. Enter the full signature as it appears in typed or printed form.

Type or Print Name of Appropriate Signatory. The appropriate signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in the signature form.

Person to Contact for Further Information. Enter the name of the person to contact for additional information regarding the matters reported on this form. Include the telephone number for the person listed here.

Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B)

Only Items 14-18 may be amended. To amend, complete only Items 1-4 and the item(s) being amended.

1. Applicant's Name (Last, First, Middle (specify if none), (Jr., Sr., etc.))		2. Applicant's CRD No.	Applicant's SSN
3. Sponsoring Bank			4. Sponsoring Bank CRD No.
5. Office of Employment Not Applicable	6. CRD Branch # Not Applicable	7. Billing Code (optional)	
8. Current Residential Address (Street, City, State/Country, ZIP Code)			

NOTICE TO THE INDIVIDUAL WHO IS THE SUBJECT OF THIS FILING

As a former Bank Securities Representative of the Sponsoring Bank filing this Form U-5B, you are under the continuing jurisdiction of regulators and may have to provide information about your activities while associated with this Sponsoring Bank. Forward any residential address changes for two years following your termination date or last Form U-5B amendment to:

CRD Address Changes, 9513 Key West Avenue, Rockville, MD 20850-3389.

9. Affiliated Firms Not Applicable
10. Is this a FULL TERMINATION <input type="checkbox"/> Yes <input type="checkbox"/> No
11. Federal Banking Agency Termination A. Registratoin to be terminated with the following: <input type="checkbox"/> OCC <input type="checkbox"/> FDIC <input type="checkbox"/> FRS
12. Date Terminated (MM/DD/YYYY) (This date represent the actual date that the termination of registration is effective.
13. Reason for Termination (Check one) <input type="checkbox"/> Voluntary <input type="checkbox"/> Deceased <input type="checkbox"/> Permitted to Resign <input type="checkbox"/> Discharged <input type="checkbox"/> Other Provide an explanation:

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B) — continued

Form U-5B
Page 2 of 6

Applicant's Name (Last, First, Middle)	Social Security No.	Applicant's CRD No.	Sponsoring Bank CRD No.
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If the answer to any of the following questions in Items 14, 15, 16, 17 or 18 is "YES", and you cannot utilize the certification in item 19 below, attach complete details of all events or proceedings on appropriate DRP U-5(s).

If the information in Items 14-18 has already been reported on Form U-4B or Form U-5B, do not resubmit DRPs for these items.

Refer to the explanation of terms section of Form U-5B instructions for explanations of italicized terms.

14. Criminal Disclosure

While employed by or associated with your sponsoring bank, was the individual:

- A. convicted of or did the individual plead guilty or nolo contendere ("no contest") in a domestic, or foreign, or military court to any *felony*? 1
- B. charged with any *felony*? 2
- C. convicted of or did the individual plead guilty or nolo contendere ("no contest") in a domestic, foreign or military court to a *misdemeanor involving*: investments or an *investment-related* business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses? 3
- D. charged with a *misdemeanor* specified in 14.C? 4

15. Regulatory Action Disclosure

While employed by or associated with your sponsoring bank, was the individual *involved* in any *disciplinary* action by a Federal banking agency, domestic or foreign governmental body or *self regulatory organization* (other than those designated as a "*minor rule violation*" under a plan approved by the U.S. Securities and Exchange Commission) with jurisdiction over the *investment-related* businesses? 5

16. Investigation Disclosure

Currently is, or at termination was, the individual the subject of an *investigation* or *proceeding* by a Federal banking agency, domestic or foreign governmental body or *self-regulatory organization* with jurisdiction over *investment-related* businesses? 6

17. Customer Complaint Disclosure

- While employed by you sponsoring bank was the individual the subject of an *investment-related*, consumer-initiated *complaint* or proceeding (even if such complaint was received after the individual was no longer employed with your firm) that:
 - A. alleged compensatory damages of \$10,000 or more, fraud, or wrongful taking of property? 7
 - B. was settled or decided against the individual for \$5,000 or more, or found fraud or the wrongful taking of property? 8

18. Internal Review Disclosure

Currently is, or at termination was, the individual under internal review for fraud or wrongful taking of property, or violating *investment-related* statutes, regulations, rules or industry standards or conduct? 9

DISCLOSURE CERTIFICATION (OPTIONAL)

You may only certify to the accuracy and completeness of the disclosure information in the individual's file if it has been fully provided in DRP format. If DRP(s) are not on file, do not answer these certification boxes. Provide full details of all matters on DRP U-5B(s). All appropriate questions in Items 14, 15, 16, 17 or 18 above must be answered, regardless of whether the certification is being utilized. Refer to the Form U-5B instructions for additional information on the utilization of the certification language.

This is to certify that details relating to the above answers to Items 14, 15, 16, 17 or 18 have been previously reported on amendments to Form U-4B or Form U-5B filed on behalf of this individual. Updated information will be provided, if needed, as it becomes available to the firm. This is to further certify the following:

- A. There is no additional information to be reported at this time 10
- B. There is additional information to disclose that is reported on the appropriate DRP U-5B(s) 11
- C. There is updated information, reported on the appropriate DRP U-5B(s), relating to disclosures previously reported 12

I verify the accuracy and completeness of the information contained in and with this form.

Date (MM/DD/YYYY) Signature of appropriate signatory

Type or print name of appropriate signatory

Person to contact for further information Telephone No. of person to contact

A copy of this form must be provided to the terminated individual.

**Uniform Termination Notice for Bank Securities Representative Registration
(Form U-5B)—continued**

Form U-5B
Page 3 of 6

CRIMINAL DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-5B) is an INITIAL OR AMENDED response used to report details for affirmative responses to *Items 14.A, 14.B, 14.C and 14.D* on Page 2 of the Form U-5B.

Check item(s) being responded to:

14. While employed by or associated with your sponsoring bank, was the individual:

A. convicted of or did the individual plead guilty or nolo contendere ("no contest") in a domestic, or foreign, or military court to any felony?

B. charged with any felony?

C. convicted of or did the individual plead guilty or nolo contendere ("no contest") in a domestic, foreign or military court to a misdemeanor involving: investments or an investment-related business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?

D. charged with a misdemeanor specified in 14.C?

Use the DRP to report all charges arising out of the same event. One event may result in more than one affirmative answer to the above items. Multiple counts of the same charge arising out of the same event(s) should be reported on the same DRP. Unrelated criminal actions, including separate cases arising out of the same event, must be reported on separate DRPs.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.

2. Formal charge(s) were brought in:

Court (Name of Federal Military, State or Foreign Court)	Location of Court (City or County and State or Country)	Docket/Case Number

3. Charge Detail Disclosure: (Continue on additional Criminal Disclosure Reporting Page U-5B if more than three charges arise out of the same event.)

Chg#	Formal Charge(s) Description	Charge Date (MM/DD/YYYY)	Number of Counts	Charge Type (check one only)		Plea (Guilty, Not Guilty, etc.)	Charge is Currently (check one only)	Appeal Date (MM/DD/YYYY)	Product Type (if charge is investment-related)
				Misdemeanor	Felony				
1.							<input type="checkbox"/> Pending <input type="checkbox"/> Final <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-Trial Intervention		
2.							<input type="checkbox"/> Pending <input type="checkbox"/> Final <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-Trial Intervention		
3.							<input type="checkbox"/> Pending <input type="checkbox"/> Final <input type="checkbox"/> On Appeal <input type="checkbox"/> Pre-Trial Intervention		

IF FINAL, ON APPEAL, OR PRE-TRIAL INTERVENTION, COMPLETE ITEMS 3 AND 4. FOR EACH CHARGE THAT IS PENDING, COMPLETE ONLY ITEM 4.

Chg#	Disposition Type: (Convicted, Acquitted, Dismissed, Pre-Trial Intervention, etc.)	Disposition Date (MM/DD/YYYY)	Disposition Detail Sentence/Penalty (if applicable)	Duration (if sentence, suspension, probation, etc.)	Start Date (MM/DD/YYYY)	Penalty/Fine Amount (if applicable)	Date Paid (MM/DD/YYYY)
1.							
2.							
3.							

4. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which was subject of the charge(s) occurred. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of appropriate signatory

**Uniform Termination Notice for Bank Securities Representative Registration
(Form U-5B) – continued**

Form U-5B
Page 4 of 6

REGULATORY ACTION DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-5B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to **Item 15** on Page 2 of the Form U-5B.

15. While employed by or associated with your sponsoring bank, was the individual involved in any disciplinary action by a Federal banking agency, domestic or foreign governmental body or self regulatory organization (other than those designated as a "minor rule violation" under a plan approved by the U.S. Securities and Exchange Commission) with jurisdiction over the investment-related businesses?

One event may result in more than one affirmative answer to these items. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.

1. Regulatory Action Initiated by (Name the regulator, foreign financial regulatory authority, SRO or commodities exchange, etc.)	2. Regulatory Action Type	3. Date Initiated (MM/DD/YYYY)
4. Docket/Case Number	5. Employing Firm when events occurred	6. Product Type(s)
7. Describe the allegations related to this regulatory action (Use reverse side of this sheet for additional comments if necessary.)		
8. Is regulatory action currently (check one) <input type="checkbox"/> Pending <input type="checkbox"/> On Appeal <input type="checkbox"/> Final		9. If on appeal, regulatory action appealed to (SEC, SRO, U.S. Court of Appeals, etc.)
		10. If on appeal, date filed (MM/DD/YYYY)

IF FINAL OR ON APPEAL, COMPLETE ALL ITEMS BELOW. FOR PENDING ACTIONS, COMPLETE ITEM 19 ONLY.

11. How was the matter resolved? (Settled, Consent, etc.)	12. Resolution Date (MM/DD/YYYY)	13. Sanctions (Suspended, Censured, Barred, Requalification, etc.)
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14. If Suspended, Enjoined or Barred:

Is suspension/injunction/bar of a fixed duration? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>(If No, provide details in Item 19)</small>	Suspension/Injunction Bar Start Date (MM/DD/YYYY)	Suspension/Injunction Bar Duration	Suspension/Injunction/Bar capacity affected (General Securities Principal, Financial, & Operations Principal, etc.)
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15. If requalification by exam/retraining was a condition of the sanction:

Is requalification/retraining time-related? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, length of time given to requalify/retrain: <small>(If No, provide details in Item 19)</small>	Type of exam required for requalification	Has condition been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--	---	--

16. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation: (Fill in amount and MM/DD/YYYY in appropriate box)

Penalty/Fine \$	Date Paid	Restitution \$	Date Paid	Disgorgement \$	Date Paid	Other \$	Date Paid
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17. Were you required to pay any part of the monetary items disclosed in 16: Yes No (if yes, fill in amount and MM/DD/YYYY in appropriate box)

Penalty/Fine \$	Date Paid	Restitution \$	Date Paid	Disgorgement \$	Date Paid	Other \$	Date Paid
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18. Was payment of all or any part of a monetary award, penalty or fine waived? Yes No If yes, provide details of Waiver in 19 below.

19. Provide summary of details related to the action status and/or disposition and include relevant terms, conditions and dates. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of appropriate signatory

**Uniform Termination Notice for Bank Securities Representative Registration
(Form U-5B)—continued**

 Form U-5B
Page 5 of 6

INVESTIGATION/INTERNAL REVIEW DISCLOSURE REPORTING PAGE
GENERAL INSTRUCTIONS

 This Disclosure Reporting Page (DRP U-5B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to *Items 16 and 18* of the Form U-5B.

 Check item(s) you are responding to:

16. Currently is, or at termination was, the individual the subject of an *investigation or proceeding* by a Federal banking agency, domestic or foreign governmental body or *self-regulatory organization* with jurisdiction over *investment-related* businesses?
One event may result in more than one investigation. If more than one authority is investigating the individual, use a separate DRP to provide details.
18. Currently is, or at termination was, the individual under internal review for fraud or wrongful taking of property, or violating *investment-related* statutes, regulations, rules or industry standards or conduct?

If the individual has been notified that the investigation/internal review has been concluded without formal action, complete Items 1, 2, 3, and 4 of this DRP to update.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.

PART I

1. Notice received from (Name of Regulator, Agency, SRO, etc. initiating the investigation)	2. Notice date (MM/DD/YYYY)
3. Describe briefly the nature of the investigation/internal review, if known, or details of the resolution (Use reverse side of this sheet for additional comments if necessary.)	
4. Date Resolved (MM/DD/YYYY)	
(MM/DD/YYYY)	Signature of <i>appropriate signatory</i>

PART II
The individual subject may use this space for details to affirmative answers of Item 18 only.

The individual who is the subject of the internal review may provide a brief summary of this event. The summary must fit within the space provided below. This summary may be sent to: Appropriate Federal Banking Agency, c/o Central Registration Depository, Membership Department, 9513 Key West Ave., Rockville, Maryland 20850-3389.

Date (MM/DD/YYYY)

Signature of Individual Subject

**Uniform Termination Notice for Bank Securities Representative Registration
(Form U-5B)—continued**

Form U-5B
Page 6 of 6

CUSTOMER COMPLAINT DISCLOSURE REPORTING PAGE

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP U-5B) is an INITIAL *OR* AMENDED response used to report details for affirmative responses to *Item 17.A and 17.B* of the Form U-5B.

Check item(s) you are responding to:
17. While employed by or associated with your firm, was the individual the subject of an investment-related, consumer-initiated complain or proceeding that:
 A. alleged compensatory damages of \$10,000 or more, fraud, or wrongful taking of property?
 B. was settled or decided against the individual for \$5,000 or more, or found fraud or the wrongful taking of property

One event may result in more than one affirmative answer to the above items; use only one DRP to report all the details related to one customer complaint. Use a separate DRP for each customer complaint.

Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))		
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD No.
1. Customer Name(s)		2. Customer's State(s) of Residence (2-Letter Abbreviation)
3. Employing Firm or Sponsoring Bank when events giving rise to the complaint occurred:		4. Date complaint was received (MM/DD/YYYY)
5. Allegation(s)		
6. Provide a brief summary of events related to the allegation(s) including dates when activities leading to the allegation(s) occurred		
7. Product Type(s)		8. Alleged Compensatory Damage Amount \$
9. Is complaint currently pending <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, how was complaint resolved (No Action, Withdrawn, Denied, Settled, Arbitrated, Litigated, CFTC Reparation, etc.)	If No Action, Denied, or Withdrawn, give date (MM/DD/YYYY)

IF STATUS IS SETTLED, ANSWER 10 AND 13; IF ARBITRATED OR CFTC REEPARATION, ANSWER 11 AND 13; IF LITIGATED, ANSWER 12 AND 13

10. If SETTLED by you, or on your behalf, without Arbitration, Litigation or Reparation:

Settlement Date (MM/DD/YYYY)	Settlement Amount \$	Your Contribution \$
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11. If ARBITRATED or CFTC REPARATION:

Arbitration/Reparation Claim was filed with (NASD, AAA, NYSE, CBOE, CFTC, etc.)		Date You Received Service (MM/DD/YYYY)
Case/Docket Number	Is Arbitration/Reparation currently pending? <input type="checkbox"/> Yes <input type="checkbox"/> No	

If Status if FINAL:

Disposition (Settled, Dismissed, Award, Withdrawn, etc.)		Date of Disposition (MM/DD/YYYY)		
If disposition resulted in monetary compensation:				
Award Amount \$	Award Amount \$	Settlement Amount \$	Individual's Contribution \$	Date Paid (MM/DD/YYYY)

12. If CIVIL LITIGATION:

Court that case was filed in (Name of Federal, State or Foreign Court)	Location of Court (City or County and State or Country)	Docket/Case Number
Is Civil Litigation currently pending? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date the Individual Received Service (MM/DD/YYYY)

If Status if FINAL:

Disposition (Settled, Dismissed, Judgment, Withdrawn, etc.)		Date of Disposition (MM/DD/YYYY)		
If disposition resulted in monetary compensation:				
Judgment Amount \$	Judgment Amount \$	Restitution Amount \$	Individual's Contribution \$	Date Paid (MM/DD/YYYY)
Is action currently on appeal? <input type="checkbox"/> Yes <input type="checkbox"/> No		If on appeal, date filed (MM/DD/YYYY)		

13. Provide details as to any other limits or conditions to disposition. (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY)

Signature of appropriate signatory