

Board of Governors of the Federal Reserve System



Application to Become a Savings and Loan Holding Company or to Acquire a Savings Association or Savings and Loan Holding Company—FR LL-10(e)

The application is required by section 10(b)(2) of the Home Owners' Loan Act (12 U.S.C. § 1467a(b)). This application is to be filed for certain transactions involving the formation, acquisition, or merger of a savings and loan holding company (SLHC); the acquisition by an SLHC of a savings association or

its assets; and the acquisition of control of a savings association by certain individuals associated with a SLHC. The Federal Reserve may not conduct or sponsor, and an organization is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Corporate Title of Applicant

Street Address

City State Zip Code

(Type of organization, such as corporation, partnership, business trust, association, or trust)

Hereby applies to the Board pursuant to section 10(e) of Home Owners' Loan Act ("HOLA"), 12 U.S.C. 1461 *et. seq.*; and 12 CFR 238.11(a) through (f),

for prior approval of the acquisition of direct or indirect ownership, control, or power to vote at least _____
(_____ %) of a class of voting shares or otherwise to control: _____
Percent Number

Hereby is forming a new holding company as part of a reorganization pursuant to section 10(e)(1)(B) of HOLA; and 12 CFR 238.12(a)(2):

Corporate Title of Bank or Bank Holding Company

Street Address

City State Zip Code

Does applicant request confidential treatment for any portion of this submission?

Yes

As required by the General Instructions, a letter justifying the request for confidential treatment is included.

The information for which confidential treatment is being sought is separately bound and labeled "Confidential."

No

Name, title, address, telephone number, and facsimile number of person(s) to whom inquiries concerning this application may be directed:

Name

Title

Street Address

City State Zip Code

Area Code / Phone Number

Area Code / FAX Number

Name

Title

Street Address

City State Zip Code

Area Code / Phone Number

Area Code / FAX Number

Certification

I certify that the information contained in this application has been examined carefully by me and is true, correct, and complete, and is current as of the date of this submission to the best of my knowledge and belief. I acknowledge that any misrepresentation or omission of a material fact constitutes fraud in the inducement and may subject me to legal sanctions provided by 18 U.S.C. §1001 and §1007.

I also certify, with respect to any information pertaining to an individual and submitted to the Board in (or in connection with) this application, that the applicant has the authority, on behalf of the individual, to provide such information to the Board and to consent or to object to public release of such information. I certify that the applicant and the involved individual consent to public release of any such information, except to the extent set forth in a written request by the applicant or the individual, submitted in accordance with the Instructions to this form and the Board's Rules Regarding

Availability of Information (12 C.F.R. Part 261), requesting confidential treatment for the information.

I acknowledge that approval of this application is in the discretion of the Board of Governors of the Federal Reserve System (the "Federal Reserve"). Actions or communications, whether oral, written, or electronic, by the Federal Reserve or its employees in connection with this filing, including approval if granted, do not constitute a contract, either express or implied, or any other obligation binding upon the agency, the United States or any other entity of the United States, or any officer or employee of the United States. Such actions or communications will not affect the ability of the Federal Reserve to exercise its supervisory, regulatory, or examination powers under applicable laws and regulations. I further acknowledge that the foregoing may not be waived or modified by any employee or agency of the Federal Reserve or of the United States.

Signed this _____ day of _____, _____.
Day Month Year

Signature of Chief Executive Officer or Designee

Print or Type Name Title