

## ***INTERAGENCY BIOGRAPHICAL AND FINANCIAL REPORT***

Public reporting burden for this collection of information is estimated to average 2 hours for biographical information and 2 hours for financial information.

This estimate includes time to gather and maintain data in the required form, to review instructions, and to complete the information collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, NW, Washington, DC 20429; Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; Licensing Policy and Systems Division, Comptroller of the Currency, 250 E Street, S.W., Washington, DC 20219; or Corporate Activities Division, Office of Thrift Supervision, 1700 G Street, N.W., Washington, DC 20552; and to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20503.

An organization or a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

### **GENERAL INFORMATION AND INSTRUCTIONS**

This *Interagency Biographical and Financial Report* (report) is used by **individuals**<sup>1</sup> in conjunction with other corporate filings to the appropriate regulatory agency. This report is not a stand alone document.

#### **Preparation**

Use of this report is not mandatory. Alternative formats, if used, however, must provide all requested information, including the certification of correctness. All questions must be answered with complete and accurate information that is subject to verification. If the answer is "none," "not applicable," or "unknown," so state. Answers of "unknown" should be explained. The questions are not intended to duplicate information supplied on another form or in an exhibit; a cross reference to the information is acceptable. If this report is used, questions should be answered in the space provided. Use additional sheets as necessary. Each regulatory agency will provide additional instructions for use and preparation. If the report is not complete, the regulatory agency may either request additional information or return the filing. If you are a foreign national or a United States citizen who currently resides in a foreign country, additional information will be necessary.

Financial statements from individuals must be submitted as of a date not more than 90 days prior to the date the financial report is submitted. All amounts in this report must be based on current market value in United States dollars, rounded to the nearest thousand dollars, and agree with any totals in the supplementary schedules. In addition to the sample financial schedules, you may wish to provide supplementary schedules for other items on the financial statement. If the sample financial statement is used, an answer is required to each item. If the filer chooses to use another format, the information filed must be responsive to each request for information contained in the sample format. In addition, each regulatory agency specifically reserves the right to require up to five years of financial data from any acquiring person as well as the filing of additional information and/or statements, such as a Federal income tax return or a current appraisal to support an asset's value.

If a filer has been convicted of any criminal offense involving dishonesty, breach of trust, or money laundering, or has agreed to enter into a pretrial diversion or similar program in connection with a prosecution of such offense (12 U.S.C. § 1829), the filer must obtain approval from the FDIC before being employed in or being an affiliated party with a depository institution.

Each filer must report promptly any material change in the biographical report and/or financial condition that occurs during the review period for this filing. For additional information regarding the processing procedures and guidelines and any supplemental information that may be required, please refer to the appropriate regulatory agency's procedural guidelines (i.e., the FRB's Processing Applications Through the Federal Reserve System and the Applications Procedures Manual,

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<sup>1</sup>A **company** seeking to directly or indirectly acquire control of a bank or thrift should consult with the appropriate regulatory agency for filing instructions.

Comptroller's Corporate Manual, the FDIC's Rules and Regulations (12 C.F.R. § 303.14) and relevant policy statements, or OTS' Application Processing Handbook) or contact the agency directly for specific instruction.

### **Confidentiality**

In general, requests for confidential treatment of specific portions of the application must be submitted in writing concurrently with the submission of the application and must discuss the justification for the requested treatment. Applicant's reasons for requesting confidentiality should specifically demonstrate the harm (e.g., to its competitive position, invasion of privacy) that would result from public release of information (5 U.S.C. 552). Information for which confidential treatment is requested should be (1) specifically identified in the public portion of the application (by reference to the confidential section); (2) separately bound; and (3) labeled "Confidential." Applicant should follow the same procedure regarding a request for confidential treatment with regard to the subsequent filing of supplemental information to the application.

An Applicant should contact the appropriate regulatory agency for specific instructions regarding requests for confidential treatment. The appropriate regulatory agency will determine whether the information submitted as confidential will be so regarded and will advise the Applicant of any decision to make available to the public information labeled as "Confidential."

**INTERAGENCY BIOGRAPHICAL AND FINANCIAL REPORT**

This is filed with respect to:

\_\_\_\_\_  
Name of Subject Institution or Holding Company, Location

**Type of Filing**

**Position**

- Bank/Thrift Charter
- Bank/Thrift Holding Company
- Change in Bank Control
- Change in Senior Executive Officer or Director
- Citizenship Waiver
- Charter Conversion
- Deposit Insurance
- Federal Branch or Agency
- Other \_\_\_\_\_

- Organizer
- Director
- Senior Executive Officer
- Principal Shareholder
- Trustee
- Manager
- Other \_\_\_\_\_

**BIOGRAPHICAL REPORT**

**1. Personal Information**

(a) Name \_\_\_\_\_  
(Last) (First) (Middle--no initials)

(b) Residence \_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

(c) If at residence less than five years, list addresses and dates occupied for past five years.

Date From Date To Number and Street City State Zip Code

(d) Date of birth \_\_\_\_\_  
(Month) (Day) (Year)

(e) Place of birth \_\_\_\_\_  
(City) (State) (Country)

(f) Social Security No. \_\_\_\_\_

(g) Citizenship \_\_\_\_\_  
(Country) (Date, if Naturalized)

(h) If not a U.S. citizen, Passport No. \_\_\_\_\_ Home Country ID No. \_\_\_\_\_  
Father's name and Mother's maiden name: \_\_\_\_\_  
Immigration File No. \_\_\_\_\_

(i) Telephone and fax numbers where you may be reached during business hours:

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(Area Code)(Telephone Number) (Fax Number)

(j) Trade names and/or other names used in place of given name and period of and reason for use.

Name                      Period of Use                      Reason for Use

## 2. Employment Record

(a) List employment in reverse chronological order for the last five years.

| <u>Date</u><br><u>From</u> | <u>Date</u><br><u>To</u> | <u>Name/Location (City, State)</u><br><u>Nature of Business</u> | <u>Position Held/</u><br><u>Nature of Duties</u> | <u>Reason for</u><br><u>Leaving</u> |
|----------------------------|--------------------------|---|--|-------------------------------------|
|----------------------------|--------------------------|---|--|-------------------------------------|

(b) Have you ever been dismissed or asked to resign from any past employment, including a less than honorable discharge from military service?  Yes     No

If "yes," complete the following:

| <u>Employer's Name/</u><br><u>Address/Telephone</u> | <u>Position</u> | <u>Date of</u><br><u>Discharge</u> | <u>Explanation</u> |
|---|-----------------|------------------------------------|--------------------|
|---|-----------------|------------------------------------|--------------------|

## 3. Education and Professional Credentials

List each (a) diploma/degree from high schools, colleges, universities, or other schools, and (b) professional license or similar certificate you now hold or have held (for example, Attorney, Physician, CPA, NASD or SEC registration).

(a) School's Name/Location                      From                      To                      Degree

(b) License                      Issuing Authority                      Date Issued                      Expiration

**4. Business and Banking Affiliations**

(a) List any businesses (corporation, partnership, joint venture, trustee) with which you are associated.

| <u>Business Name/<br/>Location</u> | <u>Nature of<br/>Business</u> | <u>Position/<br/>Relationship</u> | <u>Percent<br/>Ownership</u> | <u>From</u> | <u>To</u> |
|------------------------------------|-------------------------------|-----------------------------------|------------------------------|-------------|-----------|
|------------------------------------|-------------------------------|-----------------------------------|------------------------------|-------------|-----------|

(b) List any financial institutions with which you are or have been associated as an officer, director, partner, trustee, or owner (10% ownership or more of any class of stock).

| <u>Financial Institution/<br/>Location</u> | <u>Nature of<br/>Business</u> | <u>Position/<br/>Relationship</u> | <u>Percent<br/>Ownership</u> | <u>From</u> | <u>To</u> |
|--|-------------------------------|-----------------------------------|------------------------------|-------------|-----------|
|--|-------------------------------|-----------------------------------|------------------------------|-------------|-----------|

(c) Are you now or are you proposed to be a "management official," as defined in the Depository Institutions Management Interlocks Act (DIMIA)(12 U.S.C. §§ 3201-3208), of another insured depository institution or depository institution holding company?  Yes  No

If "yes," explain either why the potential interlock is not a violation of the DIMIA, or what action will be taken to prevent a violation of the DIMIA.

(d) Are you in the process of being considered for a senior executive officer or director position by any other regulatory agency?  Yes  No

If "yes," provide the name of the agency and the institution or holding company.

**5. Legal and Related Matters**

*(If "yes" is answered to any item in (a) - (e) below, describe the situation in detail, including the name and location of the institution, business, or parties involved, the date(s), nature of the charge/association/proceeding, name and address of court involved, and the disposition.)*

(a) Have you ever been the subject, in your individual or corporate capacity, of a prior or current application or notice that was filed in final form and subsequently denied, withdrawn, or otherwise failed to obtain favorable action, or other regulatory matter and/or administrative action pertaining to any federal or state financial institution?  Yes  No

- (b) Have you been associated as a senior executive officer, director, or principal shareholder (owning 10% or more of the outstanding stock) with any insured depository institution or financial institution holding company that has been subject to any enforcement action or have you been personally subject to a prohibition or removal order, civil money penalty, or other enforcement action?  Yes  No
- (c) Have you been associated as a senior executive officer, director, or principal shareholder of any insured depository institution, as defined in 12 U.S.C. § 1813(c), that: (1) failed, (2) received financial assistance from a financial institution depository agency (e.g., FDIC, Resolution Trust Corporation, or former Federal Savings and Loan Insurance Corporation), or (3) was a merger partner with an institution that received financial assistance from a financial institution depository agency?  Yes  No
- (d) Have you ever been involved, or are you currently involved, in any lawsuit, formal or informal investigation, examination, or administrative proceeding (excluding routine or customary audits, inspections, and investigations) issued against, entered into by, or involving you or a company with which you are or were associated that may result in or resulted in any sanction, fine, monetary damage, loss of right or benefit, revocation of license, agreements, undertakings, consents or orders with any federal or state court, any department, agency, or commission of the U.S. government or state, municipal, or foreign government entity?  Yes  No
- (e) Have you or any business or enterprise with which you have been associated as an officer, including a senior executive officer, director, or principal shareholder of 10% or more of outstanding stock, filed for bankruptcy or forfeited property?  Yes  No
- (f) Have you ever defaulted on a personal loan, loan to your company, or loan in which you were a guarantor? If "yes," provide complete details, including direct and indirect debt terms, defaulted amount, and lender.  Yes  No
- (g) Have you or any business or enterprise with which you are or were associated as an officer, including a senior executive officer, director or principal shareholder (owning 10% or more of the outstanding stock), been the subject of any law enforcement agency's charge, arrest, indictment, conviction, conviction whereby the record was subsequently expunged, or have you pleaded *nolo contendere* to any criminal matter (other than minor traffic violations)?  Yes  No

If "yes," complete the following:

| <u>Name/Type of Business</u> | <u>Relationship/ Stock Owned</u> | <u>Nature of Charge/Proceeding</u> | <u>Date of Charge</u> | <u>Jurisdiction Location</u> | <u>Disposition</u> | <u>Date</u> |
|------------------------------|----------------------------------|------------------------------------|-----------------------|------------------------------|--------------------|-------------|
|------------------------------|----------------------------------|------------------------------------|-----------------------|------------------------------|--------------------|-------------|

## 6. Additional Information

Present any other information you believe is important to evaluate your filing. If you are involved in the organization of a new institution, discuss your specific role.

**FINANCIAL REPORT**

FINANCIAL STATEMENT AS OF \_\_\_\_\_  
(in thousands)

| Assets  |          | Liabilities and Net Worth                           |          |
|---|----------|---|----------|
| 1. Cash on hand and in financial institutions | \$ _____ | 8. Accounts payable                                 | \$ _____ |
| 2. Marketable securities (Schedule A)         | _____    | 9. Notes payable and other loans (Schedule F)       | _____    |
| 3. Other securities                           | _____    | 10. Real estate mortgages (Schedule C)              | _____    |
| 4. Notes receivable (Schedule B)              | _____    | 11. Other liabilities (Schedule G)                  | _____    |
| 5. Real estate (Schedule C)                   | _____    | <b>TOTAL LIABILITIES</b>                            | _____    |
| 6. Proprietary interests (Schedule D)         | _____    | 12. Net worth (Total assets less total liabilities) | _____    |
| 7. Other assets (Schedule E)                  | _____    |   |          |
| <b>TOTAL ASSETS</b>                           | \$ _____ | <b>TOTAL LIABILITIES AND NET WORTH</b>              | \$ _____ |

**CONTINGENT LIABILITIES**

In addition to the liabilities listed above, have you endorsed, guaranteed, or become otherwise indirectly or contingently liable for the debts of others or through a pending lawsuit?  Yes  No If "yes," complete the following:

| Name and address of Debtor/Obligor | Name and address of Creditor/Obligee | Description and Value of Collateral | Date Due | Current Amount |
|------------------------------------|--------------------------------------|-------------------------------------|----------|----------------|
|                                    |                                      |                                     |          |                |
|                                    |                                      |                                     |          |                |
|                                    |                                      |                                     |          |                |
|                                    |                                      |                                     |          |                |
| <b>TOTAL</b>                       |                                      |                                     |          | \$ _____       |

**SUPPORTING SCHEDULES**

Schedules must agree in total with the appropriate item contained in the Financial Statement on page 5 of this report.

**Schedule A ) Marketable Securities**

Indicate all debt and equity securities listed on an exchange or otherwise regularly traded in an open market. Separate debt and equity securities. Securities of closely held corporations should be listed on Schedule D--Proprietary Interests. The description should include the name of the issuer; the principal amount or number of shares held; and the interest rate, if applicable. Small holdings may be aggregated and shown as "other" provided that they account for no more than 10% of marketable securities.

| Description                     | Market Value |
|---------------------------------|--------------|
|                                 | \$           |
|                                 |              |
|                                 |              |
|                                 |              |
|                                 |              |
|                                 |              |
|                                 |              |
| TOTAL (carry forward to item 2) | \$           |

**Schedule B ) Notes Receivable**

The description should include the name of the obligor; the note's maturity and terms of repayment; and a description of any collateral. If the note is payable to you and others jointly, indicate only your beneficial interest under Current Balance.

| Description                     | Current Balance |
|---------------------------------|-----------------|
|                                 | \$              |
|                                 |                 |
|                                 |                 |
|                                 |                 |
|                                 |                 |
|                                 |                 |
|                                 |                 |
| TOTAL (carry forward to item 4) | \$              |



**Schedule C ) Real Estate and Related Loans**

List all real estate in which you hold a beneficial interest. Submit year-end financial statements, including profit and loss statements, for the last two years for each investment (exclude residence) in which you have an interest equal to 10% or more of your net worth. Also submit a cash flow statement on any investment property valued at greater than 10% of net worth.

| Description and Location<br>(City and State) | Owner of Property | % Owner-ship | Mortgage Holder | Maturity Date | Current Market Value* | Current Balance** |
|--|-------------------|--------------|-----------------|---------------|-----------------------|-------------------|
|  |                   |              |                 |               | \$                    | \$                |
|  |                   |              |                 |               |                       |                   |
|  |                   |              |                 |               |                       |                   |
|  |                   |              |                 |               |                       |                   |
|  |                   |              |                 |               |                       |                   |
| TOTAL  |                   |              |                 |               | \$                    | \$                |

- \* Carry TOTAL forward to item 5
- \*\* Carry TOTAL forward to item 10

**Schedule D ) Proprietary Interests**

List all business enterprises in which you hold a beneficial interest. The term "business enterprise" includes a corporation, association, partnership, business trust, sole proprietorship, or other business, the shares of which are not listed on a securities exchange or otherwise regularly traded. Under "Legal Form of Business," state the legal form of the business (corporation, joint venture, etc.) (Submit year-end financial statements, including profit and loss and cash flow statements, for the last two years for each business interest in which you have an interest equal to 10% or more of your net worth).

| Name and Address of Business    | Legal Form of Business | Nature of Business | % Ownership | Current Value |
|---------------------------------|------------------------|--------------------|-------------|---------------|
|                                 |                        |                    |             | \$            |
|                                 |                        |                    |             |               |
|                                 |                        |                    |             |               |
|                                 |                        |                    |             |               |
| TOTAL (carry forward to item 6) |                        |                    |             | \$            |

**Schedule E - Other Assets**

If any one asset amounts to 10% or more of net worth, briefly describe the asset. Include accounts receivable, merchandise and inventory at lower of cost or market value, machinery and equipment (less depreciation), life insurance at its cash surrender value, retirement funds (IRA, Keogh, etc.)

| Description                     | Basis for Valuation | Current Value |
|---------------------------------|---------------------|---------------|
|                                 |                     | \$            |
|                                 |                     |               |
|                                 |                     |               |
|                                 |                     |               |
|                                 |                     |               |
|                                 |                     |               |
| TOTAL (carry forward to item 7) |                     | \$            |

**Schedule F ) Notes Payable and Other Loans**

Indicate all loans or notes payable other than real estate mortgages listed in Schedule C. Loan origination information must include the original date, loan amount, and co-makers, if any, and their percent obligation. Small obligations may be aggregated and shown as "other" provided that they account for no more than 20% of other loans and notes payable. Indicate any debt that is contractually delinquent by an asterisk next to the current balance.

| Name and Address of Creditor and Loan Origination Information | Description and Value of Collateral | Maturity Date | Current Balance |
|---|-------------------------------------|---------------|-----------------|
|   |                                     |               | \$              |
|   |                                     |               |                 |
|   |                                     |               |                 |
|   |                                     |               |                 |
| TOTAL (carry forward to item 9)                               |                                     |               | \$              |

**Schedule G - Other Liabilities**

If any one liability amounts to 10% or more of net worth, briefly describe it. Include interest and taxes due and unpaid, other debts accrued and other liabilities.

| Payable To                       | Description | Maturity Date | Current Balance |
|----------------------------------|-------------|---------------|-----------------|
|                                  |             |               | \$              |
|                                  |             |               |                 |
|                                  |             |               |                 |
|                                  |             |               |                 |
|                                  |             |               |                 |
| TOTAL (carry forward to item 11) |             |               | \$              |

**Cash Flow Statement\***

| <u>Sources of Cash</u>                                      | 19__ | 19__ | Year to Date<br>19____ | Projected Next<br>Year<br>19____ |
|---|------|------|------------------------|----------------------------------|
| Salaries, wages, commissions,<br>or other employment income | \$   | \$   | \$                     | \$                               |
| Rents, royalties, and<br>investments                        |      |      |                        |                                  |
| Income from dividends and<br>interest                       |      |      |                        |                                  |
| Other sources   |      |      |                        |                                  |
| Total cash received   |      |      |                        |                                  |
| <u>Uses of Cash</u>   |      |      |                        |                                  |
| Personal living expenses<br>(rent, household, etc.)         |      |      |                        |                                  |
| Fixed obligations   |      |      |                        |                                  |
| Income taxes  |      |      |                        |                                  |
| Other uses  |      |      |                        |                                  |
| Total cash outlay   |      |      |                        |                                  |
| NET CASH FLOW (deficit)                                     | \$   | \$   | \$                     | \$                               |

\*Discuss any significant changes and itemize any items amounting to 10% or more of total income on a separate page, including insurance payments. Fixed obligations include bank loans, other loans, amortization and other debt servicing, and non-loan expenses for real estate investments. Any loan proceeds and debt service associated with this transaction should be included in projections for "Other" sources and uses.

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**Privacy Act Notice**

A copy of this document is provided to the appropriate regulatory agency as required under various statutes and implementing regulation(s). To the extent that it contains personal and financial information about persons, the information may be subject to the Privacy Act of 1974 (5 U.S.C. § 552a) which provides safeguards for personal information. The appropriate regulatory agency may, at its discretion, disclose any or all of the information obtained concerning you to other regulatory agencies or other law enforcement or governmental agencies, in connection with the investigation of a possible violation of any federal or state statute or when such release is determined to be in the best interest of the appropriate regulatory agency and consistent with the public interest and applicable law. The appropriate regulatory agency may obtain information about you from any and all sources without limitation. These documents are considered confidential and generally are exempt from public disclosure under the authority of 5 U.S.C. § 552, relating to a personnel, medical, or similar record, including a financial record, or any portion thereof, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

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**CERTIFICATION**

I understand that the appropriate regulatory agency may conduct extensive checks into my background, experience, and related matters in conjunction with my application or filing. I certify that the information contained in the biographical report and/or financial report has been carefully examined by me and is true, correct, and complete. I acknowledge that any misrepresentation or omission of a material fact, with respect to the foregoing, constitutes fraud in the inducement and may subject me to legal sanctions provided by 18 U.S.C. §§ 1001 and 1007.

Signed this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

|                       |                       |
|-----------------------|-----------------------|
| _____                 | _____                 |
| Signature*            | Signature             |
| _____                 | _____                 |
| Print or type name    | Print or type name    |
| _____                 | _____                 |
| Title (if applicable) | Title (if applicable) |

\* If a joint financial statement is being submitted, both parties should complete the "Certification."