

STATE OF ARKANSAS
STATE BANK DEPARTMENT
OATH OF DIRECTOR

STATE OF ARKANSAS }
COUNTY OF _____ } SS

I, the undersigned, having been elected director of _____,
(Bank or Bank Holding Company, City)

Arkansas, do solemnly swear that I will diligently and honestly administer the affairs of the bank/bank holding company so far as the duty devolves on me, and that I will not knowingly violate, nor willingly permit to be violated, any provision of the law.

Name *(please print)*

Mailing Address

City State Zip

Telephone

Signature

Subscribed and sworn to before me this _____ day of _____, 20_____.
My Commission Expires _____.

Notary Public

(Secretary should answer the following questions)

How many directors are authorized by your Articles of Agreement? _____
How many directors were elected for the year? _____