NOTICE OF ADDITIONAL TRUST OFFICE (OUT OF STATE)

submitted to the

ARKANSAS STATE BANK DEPARTMENT

By

Corporate Title of S	State Trust Institution		
Street Address			
City	County	State	Zip Code
	itten notice to the State Bank additional trust office to be o		
Street Address			
City	County	State	Zip Code
Name, title, address directed:	s, and telephone number of po	erson(s) to whom inquiries o	concerning this notice may be
	the bank's board of directors hantains no misrepresentations or		notice and that to the best of
Signature of Authori	zed Officer	Ī	Date of Notice
Typed Name		${7}$	Telephone Number

Applicant must notify the Bank Commissioner promptly of any material changes in financial or other conditions which may affect the Commissioner's decision.

AUTHORITY

A state trust institution may act as a fiduciary or otherwise engage in trust business at an office, branch, or other authorized location and maintain trust offices in any other state in accordance with A.C.A. §§ 23-51-167 and 23-51-174.

PROCEDURES

The notificant may commence business at the additional trust office thirty (30) days after the date the Commissioner receives notice, unless the Commissioner specifies another date. If the period of review is extended, the state trust institution may establish the additional office only on prior written approval by the Commissioner.

FEE

The notificant must provide a filing fee of \$300 payable to the Arkansas State Bank Department upon submission of the application.

SUPPORTING INFORMATION/DOCUMENTATION

The following information and documentation must be submitted in support of the notification to establish or acquire an additional trust office:

<u>Copy of Board Resolution</u>: A certified copy of a Board Resolution authorizing the establishment of the proposed additional trust office.

See Attachment – Resolution of the Board of Directors

<u>Fixed Asset Expenditures</u>: A general description of the surrounding area and whether the location will be owned or leased, and an estimate of the cost of the trust office.

See Attachment – Anticipated Office Structure

Activities and Market Area: Provide a general description of activities to be conducted at the proposed office and the proposed market area to be served.

<u>Legal Authority</u>: Do the laws of the proposed host state permit an Arkansas state trust institution's trust office to be maintained in the host state.

Financial Statements:

- a) A projected budget and pro forma balance sheet of the trust institution for a three-year period from the date the additional trust office is to be placed in operation.
- b) A separate budget, income and expense categories, and pro forma balance sheet of the additional trust office for each of the three years.

2

RESOLUTION OF THE BOARD OF DIRECTORS

The Board of Directors at a meeting duly called and held onadopted the following Residue and Date				
WHEREAS, it is the sense of this restablishment or acquisition of an add			the State Bank Com	missioner o
Street Address	$\overline{City \ or \ Tov}$	wn	State	
in accordance with provisions of Arkansas law and the host state's la	ws;			
NOW, THEREFORE, IT IS RESO are hereby authorized and directed Commissioner of establishment or acc	to notify on behalf	of this state to	rust institution to the	
Street Address ,	City or Town	County		
and to submit in connection therewing provide such assurances as may be consent to the establishment of an an an hereby authorizes expenditures up to expenditures above the approved among the submit of the submit	required for the purp additional office as inc \$for the	oose of inducing dicated in this R establishment o	the State Bank Com desolution. The Board of the proposed office	missioner to of Director
The above Resolution has not been restate trust institution. Notification is m		nd has been duly	entered in the minutes	s book of the
Name and Location of State Trust I	nstitution			
Signature of Authorized Bank Official	ıl		Date	
Title			Phone Nu	 ımber

ANTICIPATED OFFICE STRUCTURE

Give brief physical description of structures to be acquired or constructed, including square footage, number of offices, etc. Also, include a legal description of the property.

Circle One	Owned Leased	Total Cost
IF OWNED	Land Building Furniture and Equipment	
	TOTAL FIXED ASSET EXPENDITURES	
IF LEASED	Leasehold Improvements Furniture and Equipment	
	TOTAL FIXED ASSET EXPENDITURES	

Additiona	al comments:			

4