Nebraska Department of Banking and Finance Financial Institutions Division https://ndbf.nebraska.gov

Director indicates an intention to approve this application.

Federal Savings Association Application to Convert to a Nebraska State Bank

I,_		, President of	Savings Association		
a s	<i>Name of President</i> avings association duly org	anized under the laws of the	Savings Association United States, with its main office loc	<i>Name</i> ated at	
			lication pursuant to Sections 8-183.01		
	braska Banking Act to con-		r		
Th	e Association's Plan of Cor	version was approved by th	e Department on	, and approved by	
not	t less than sixty percent of t	he Association's members/s	hareholders at a meeting held	·	
			statements and representations and su n 8-120 of the Nebraska Banking Act.	bmit the following	
1.	Upon conversion the name of the bank will be:				
2.	The bank's main office will be at the same location as the Association's main office: Yes No If no, state the proposed location:				
Str	eet		County		
Cit	у	State	Zip Code		
3.	The Association is a:	mutual association	capital stock association.		
4.	If a mutual association, w Yes No	ill the association retain its n	nutual form of corporate organization a	after conversion?	
5.	If a capital stock association, attach a list of all stockholders with their respective address, occupation and number of shares held.				
6.	If a mutual association that plans to convert to a capital stock form of organization, attach a list of proposed stockholders with their respective address, occupation and number of shares held.				
7.	A copy of the Articles of A	Association, and all amendm	nents thereto, or the Comptroller of the	Currency is attached.	
8.	10	r	rticles of Association, and a draft copy Articles in the Office of the Secretary of		

- 9. A list of current Directors and Officers and a business resume for each is attached. Indicate whether any changes are planned in this list as a result of the conversion.
- 10. (a) Describe the types of services and products currently offered by the Association.

(b) Describe any changes in services and products that will be offered if the Association converts to a bank.			
 Does the Association currently have the authority to offer trust services? Yes If yes, does the Association intend to continue offering such services after conversion? 	No Yes	No	
2. Describe the Association's trade territory.			

- 13. Attach a copy of the most recent *Report of Condition and Income (Call Report)* as filed with the Federal Financial Institutions Examination Council (FIFEC).
- 14. Attach a list of all Subsidiaries, Branch Offices, Automated Teller Machines, and Loan/Deposit Production Offices. Include the location of each and the name of each, if different from that of the Association.

CERTIFICATION

I certify that the information contained in this application been examined carefully by me and is true, correct, and complete, and is current as of the date of this submission. I acknowledge that any misrepresentation or omission of a material fact constitutes fraud and may subject me to legal sanctions.

Signed this ______ day of ______, _____,

Signature

Print or type name

Title