OMB NUMBER: 3064-0143 EXPIRATION DATE: 07/31/2008

Federal Deposit Insurance Corporation

DECLARATION OF INDEPENDENT ACTIVITY FOR UNINCORPORATED ASSOCIATION

INSTRUCTIONS: An executed copy of this Declaration of Independent Activity for Unincorporated Association must be submitted before an insurance determination can be made on your Account. Please be sure to attach to this Declaration of Independent Activity for Unincorporated Association all of the documentation requested in Item 6.

Fir	nancial Institution:		•		
Clo	osing Date:				
Ac	count Number:				
Gr	oup Number:				
1.	The undersigned is		(Title) (the "Accountholder	of of	(Name of Organization) or: (Describe Duties)
2.	there is an associat	ion of two or mor	e persons formed for	some religious, educ	st for insurance purposes whenever cational, charitable, social or other older may be described as follows:
3.	The source of funds f	or the above-listed	Account was:		
4.	The members of the	Accountholder are t	the following (do not co	mplete if the number of	members exceeds ten):
5.	The officers of the Ac	countholder on the	closing date were the f	ollowing:	
6.	Attached are copies of status of the Account		the charter or bylaws of	f the Accountholder; an	d (2) evidence reflecting the tax-exempt
7.	To the best knowledg other accounts at the	•	ed, the Accountholder d	oes not have an owner	ship interest, directly or indirectly, in any
8.	Corporation ("FDIC") and to execute any a	information for the and all other docume	above-referenced Acco	unt at the named institu the payment of insuran	er to the Federal Deposit Insurance ution and to take any and all other actions ce on said Account and to subrogate to ed. If not applicable, please check box.

DECLARATION OF INDEPENDENT ACTIVITY FOR UNINCORPORATED ASSOCIATION (Continued)

The declaration is made to induce the FDIC to pay insurance covering the Account to the extent that the Account is consurance.							
10.	. This declaration, under penalty of perjury, is executed pursuant to 28 U.S.C. § 1746.						
I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Execute							
	Signature						
	Print Name						

THE PENALTY FOR KNOWINGLY MAKING OR INVITING RELIANCE ON ANY FALSE, FORGED OR COUNTERFEIT STATEMENT, DOCUMENT OR THING FOR THE PURPOSE OF INFLUENCING IN ANY WAY THE ACTION OF THE FEDERAL DEPOSIT INSURANCE CORPORATION IS A FINE OF NOT MORE THAN \$1,000,000 OR IMPRISONMENT FOR NOT MORE THAN THIRTY YEARS, OR BOTH (18 U.S.C. § 1007).

PAPERWORK REDUCTION ACT NOTICE

The information collected is required for the determination of insured deposits when a financial institution closes in accordance to Deposit Insurance Rules and Regulations. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Paper Reduction Act Clearance Officer, Legal Division, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, D.C. 20429 and the Office of Management and Budget, Paperwork Reduction Project (3064-0143), Washington, D.C. 20503. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.