

ST. CERT.
 Institution

SUMMARY OF DEPOSITS

As of Close of Business June 30, 2008

INSTRUCTIONS: Please read the attached instructions before you fill out this form. Report amounts of deposits in thousands. Total deposits for all offices must equal total deposits on the JUNE 30, 2008 Report of Condition sent to your main regulatory agency. Make a copy for your files. See attachment for mailing address.

SUMMARY of DEPOSITS	REPORT of CONDITION	U.S. BRANCHES of FOREIGN BANKS	MAILING ADDRESS
Total Deposits =	SCHEDULE RC ITEM 13 A DEPOSITS IN DOMESTIC OFFICES	Schedule E ITEM 6 A & C	

OFFICE NUMBER	CHANGE CODE	EFFECTIVE DATE CCYY/MM/DD	SERVICE TYPE	OFFICE NAME & ADDRESS COUNTY	CEN CODE	CONSOLIDATED OFFICE	TOTAL DEPOSITS		
							BIL	MIL	THOUS
				CNTY#					
				CNTY#					
				CNTY#					
				CNTY#					
				CNTY#					
				CNTY#					

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				CNTY#					
				CNTY#					
				CNTY#					
9999				TOTAL DEPOSITS FOR ALL OFFICES					

I have verified this statement according to the instructions provided, and attest that it is correct and complete to the best of my knowledge and belief and that the deposit totals agree with those reported on the June 30, 2008 Report of Condition.

Preparer/Contact Name and Telephone Number (Please Print)

Authorized Official Signature

Date

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