July 31, 2019

Board of Governors of the Federal Reserve System

Federal Deposit Insurance Corporation
Office of the Comptroller of the Currency

Uniform Termination Notice for Municipal Securities Principal or Municipal Securities Representative Associated with a Bank Municipal Securities Dealer—Form MSD-5

The Board of Governors of the Federal Reserve System, the Federal Deposit Insurance Corporation, and the Office of the Comptroller of the Currency are authorized to collect this information pursuant to the authority contained in the following statutes: 15 U.S.C. §§ 78o-4, 78q, and 78w.

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. The information provided by each respondent is considered to be confidential.

PRIVACY ACT NOTICE

The Federal Reserve Board is authorized to request this information from you by Sections 3, 15B(c), 15C, 17 and 23 of Securities Exchange Act of 1934 (15 U.S.C. 78c, 78o-4, 78o-5, and 78q and 78w); and Section 11 of the Federal Reserve Act (12 U.S.C. 248). The purpose for collecting the information is to comply with the registration requirements of municipal securities dealers, municipal securities representatives, and U.S. Government securities brokers or dealers and associated persons contained in the Securities Exchange Act of 1934, and to support the Board's regulatory and supervisory functions. Furnishing the requested information is mandatory. Failure to provide the requested information in whole or in part may delay or prohibit the determination of your compliance with applicable registration and professional qualification requirements. The information you provide is protected by the Privacy Act, 5 U.S.C. 552(a). The information may be furnished to third parties as authorized by law and used according to any of the routine uses described in the Municipal or Government Securities Principals and Representatives System of Records (BGFRS-17), available at https://www.gpo.gov/fdsys/pkg/PAI-2013-BGFRS/xml/PAI-2013-BGFRS.xml#bgfrs17. If you have any questions or concerns about the collection or use of the information, your may contact the Secretary of the Board, Board of Governors of the Federal Reserve System, 20th Street and Constitution Avenue, NW, Washington, DC 20551.

Uniform Termination Notice for Municipal Securities Principal or Municipal Securities Representative Associated with a Bank Municipal Securities Dealer

1. Individual's Name:

Last _____ First _____ Middle (if none, enter "N/A") _____

2. Capacity (check all that apply):

☐ Municipal Securities ☐ Government Securities

3. ~~Social Security Number (optional):~~ _____

Not applicable (remove text and filing line from form)

4. Bank Municipal Securities Dealer:

A. _____
Name

B. _____
Registration Number

C. _____
Main Street Address

_____ City _____ State _____ Zip Code

5. Office of Employment Address:

_____
Street Address

_____ City _____ State _____ Zip Code

6. Date Terminated:

_____
Month/Day/Year

7. Reason for Termination (check one):

☐ Resigned* ☐ Discharged* ☐ Deceased ☐ Other*

**Furnish full details on attached sheet if related to a violation or probable violation of banking or securities law.*

8. While associated with the dealer named in item 4, was the individual named in item 1 the subject of any investigation, proceeding, disqualification, or disciplinary action by any government agency or self-regulatory organization (as defined in section 3(a)(26) of the Securities Exchange Act of 1934) described in Rules G-4 and G-5 of the Municipal Securities Rulemaking Board?

☐ Yes** ☐ No

***Furnish full details on attached sheet.*

9. To be filed with the following (check one):

☐ Board of Governors of the Federal Reserve System ☐ Federal Deposit Insurance Corporation ☐ Comptroller of the Currency

Acceptance of this form for filing shall not constitute any finding that the information submitted herein is true, current, complete, or not misleading. Intentional misstatements or omissions of fact may constitute federal criminal violations. (See 18 U.S.C. §§ 1001 and 1005, and 15 U.S.C. 78ff.)

_____ Print Name of Municipal Securities Principal
_____ Signature of Municipal Securities Principal
_____ Date (MM/DD/YYYY)

Person to contact for further information:

_____
Name

_____
Street Address

_____ City _____ State _____ Zip Code

_____
Area Code / Phone Number

Acknowledgment for: ☐ Form MSD-5 ☐ Form G-FIN-5

10. _____
Name of Person Terminated

11. _____
Bank Municipal Securities Dealer Name

12. _____
Bank Municipal Securities Dealer Address

_____ _____ _____
City State Zip Code

13. _____
Attention

Receipt Stamp

When the Form MSD-5 is received by the appropriate regulatory agency, this acknowledgment will be stamped to show receipt and returned to the person named in item 13. The stamped acknowledgment should be retained to substantiate filing.

MAIL THE FORM TO THE REGULATOR INDICATED IN ITEM 9.

Board of Governors of the Federal Reserve System
Submit completed forms in Portable Document Format (PDF) to the Federal Reserve's secure email address: MSD-GSD-Registration@frb.gov

Federal Deposit Insurance Corporation
Policy & Program Development Section
550 17th Street, NW, Room MB-5100
Washington, DC 20429

Submit completed forms in Portable Document Format (PDF) to the Federal Deposit Insurance Corporation's secure email address: msg-gsd-registration@fdic.gov or, alternatively, mail the form and any attachments to:
(space)
Federal Deposit Insurance Corporation (non-bold text)

~~**The Office of the Comptroller of the Currency**~~
Upload completed forms via the OCC's BankNet website www.banknet.gov
For assistance call (202) 649-6360

The Office of the Comptroller of the Currency