## **Oath of Savings Association Director**

Name of Savings Association				
Charter No.				
City	_ County	St	tate	
I, the undersigned, a (proposed) director of the above-named savings association, do solemnly swear (affirm) as follows:				
1. I acknowledge that service important undertaking that carries				ciation is an
2. As a director of the above-fiduciary duty to its shareholders/finsurance funds to administer the management. In carrying out my place the interests of the savings a loyalty and care to the above-name	members and cre savings associati duties and respo association before	editors and to the ion's affairs fait nsibilities, I sha e my own intere	ne applicable feder thfully and to over all exercise reason	ral deposit rsee its able care and
3. I shall diligently and honestly administer the affairs of the savings association, and I shall not knowingly violate, or willingly permit to be violated, any applicable statute or regulation. I shall ensure that I learn of changes in statutes, regulations, and policies of the Office of the Comptroller of the Currency and the Federal Deposit Insurance Corporation or any state to whose jurisdiction my association is subject, which affect my duties, responsibilities, or obligations as a director and affiliated person of the savings association.				
4. I shall attend meetings of the board of directors and participate fully on all committees of the board to which I am appointed.				
Signature Typed Name Mailing Address City State Date				
Notary's Affirmation				
Sworn to before me and subscribed in my presence this day of				
Notary Public				
My Commission Expires				