

Notice of Commencement of Fiduciary Activities

Date

Director for District Licensing
Northeastern District
Office of the Comptroller of the Currency
340 Madison Avenue, Fifth Floor
New York, New York 10173

Re: Fiduciary Powers Request
OCC Control Number

Dear Director:

Per the (*approval/conditional approval*) granted to us on (*date*), we commenced fiduciary activities on (*date*). This information is provided to complete your records.

Sincerely,

—Signature—

Name and Title