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Federal Deposit Insurance Corporation  
**DECLARATION FOR CUSTODIAN DEPOSIT**

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**PRIVACY ACT STATEMENT**

The Federal Deposit Insurance Act (12 U.S.C. §§ 1819, 1821, and 1822) and 12 C.F.R. Part 330 authorize the collection of this information. The purpose for collecting this information is to support the determination of deposit insurance coverage and/or the payment of deposit insurance on deposits of the closed financial institution. Furnishing this information is voluntary but failure to provide the requested information in whole or in part may delay or prevent the determination of deposit insurance coverage and/or the payment of deposit insurance on deposits of the closed financial institution. The information provided by individuals is protected by the Privacy Act, 5 U.S.C. 552a. The information may be furnished to third parties, including law enforcement authorities, as authorized by law, or used according to any of the other routine uses described in the FDIC Insured Financial Institution Liquidation Records (FDIC-30-64-0013) System of Records. A complete copy of this System of Records is available at [www.fdic.gov/about/privacy/index.html](http://www.fdic.gov/about/privacy/index.html). If you have questions or concerns about the collection or use of the information, you may contact the FDIC's Chief Privacy Officer at [Privacy@fdic.gov](mailto:Privacy@fdic.gov).

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**INSTRUCTIONS:** Please type or print legibly, date, and sign.

Financial Institution: \_\_\_\_\_

Closing Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Customer Number: \_\_\_\_\_

The undersigned, being of lawful age, declares as follows:

1. The undersigned is acting as custodian (the "Custodian") for \_\_\_\_\_ (the "Principal"), who is my \_\_\_\_\_. The Principal is the owner of all the funds in the above-referenced account (the "Account").
2. The undersigned's authority to serve as custodian for the Principal is derived from the attached written agreement(s). If no such agreement is attached, please provide an explanation of the undersigned's authority to serve as Custodian for the Principal.
3. To the best knowledge of the undersigned, the Principal does not have an ownership interest in any other accounts at the above institution, whether established by the Principal or by any other agent or custodian acting for the Principal, except as noted here \_\_\_\_\_.
4. This declaration is made to induce the Federal Deposit Insurance Corporation to pay insurance covering the Account to the extent that the Account is covered by insurance.
5. This declaration, under penalty of perjury, is executed pursuant to 28 U.S.C. § 1746.

I declare under penalty of perjury that the foregoing is true and correct. Executed on \_\_\_\_\_.

\_\_\_\_\_  
Name of Custodian (*Please print*)

\_\_\_\_\_  
Signature of Custodian

**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).**

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**PAPERWORK REDUCTION ACT NOTICE**

The information collected is required for the determination of insured deposits when a financial institution closes in accordance with the FDIC's deposit insurance regulations. Public reporting burden for this collection of information is estimated to average .5 hours 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 Paperwork Reduction Act Clearance Officer, Legal Division, Federal Deposit Insurance Corporation, 550 17<sup>th</sup> 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.