

## 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