

Emergency Processing Request

Date

Director for District Licensing
Comptroller of the Currency
Street Address
City, State, ZIP Code

Dear Director:

We are submitting an application to *(merge, consolidate, purchase the assets and assume the liabilities) of (name and location of target or selling institution) (into, with, by) (name and location of acquiring bank) under the charter of (name of resulting bank) and title of (name of resulting bank) and would like the application to be handled under emergency combination procedures. The financial institution in distress is the (target institution name).*

The target institution is a financial institution whose circumstances are sufficiently serious to require swift action.

This request for emergency processing is based on the following circumstances:

(NOTE: Applicant(s) must describe the emergency in detail. Specifically address the distressed institution's capital, earnings, asset quality, liquidity, and management. The description must include details of any regulatory assistance and indicate any other action the institutions contemplate in conjunction with the proposed transaction.)

The target institution was last examined by the *(name of applicable regulatory agency)* on *(date of last examination)*.

Questions about this request for emergency processing should be directed to *(name and title of contact)* who can be reached at *(mailing address and telephone number)*.

Sincerely,

—Signature—

Name and Title