

## Application Amendments

Date

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

Re: Application Description, CAIS Control Number

Dear Director:

We, the undersigned, having submitted to the Comptroller of the Currency (OCC) a charter application dated (*date*), affirm the same, subject to the following modification(s):

### **[Include appropriate sections only]**

- Insiders
  - Identify any person added to or deleted from the originally identified group of insiders.
  - Forward appropriate “Interagency Biographical and Financial Reports” for any person added along with information about each officer as specified in the “Management and Directors’ Banking Experience” section of the Charters booklet.
- Appointment of Contact Person

We, the undersigned:

  - Revoke the appointment of contact person, dated (*date*) that designated (*name*) as the contact person in connection with the charter application.
  - Designate (*name*), who lives at (*number and street*) in (*city, state and ZIP code*), as our new contact person. (*Name*) may be contacted during normal business hours by telephone at (*phone number*) and e-mail (*e-mail address*).
  - Authorized (*new contact person’s name*) to represent us before the OCC, to receive all correspondence and documents from the OCC, to keep the organizers informed of all communication with the OCC, and, except when the OCC requires personal action by the organizers, to do what is necessary to apply for and organize a national bank.
- Application

*Identify any modification(s) to the charter application, including business plan or any other attachments. For each modification, provide a short explanation.*

The UNDERSIGNED, together and individually, certify to the Comptroller of the Currency that, subject to the above changes amending the application, the information contained in the original charter application filed on (*date*) is true, correct, and complete.

[Signatures of all current organizers of the charter application]

***Signature***

***Typed Name***

***Date***

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