## **Joint Oath of Bank Directors**

	Vame					
Date _	County	_				
City	County	State	e			
	e undersigned directors of the a solemnly swear (affirm) that:	bove-name	d bank, do	, personally, and not one	e for the	
carryin interest	We, as directors, have a leg ster the depository institution's g out our duties and responsibits to of the depository institution to and care to the above-named de-	affairs fait lities, we shoefore our c	hfully and nall exercis own interes	to oversee its manageme e reasonable care and pl	ent. In ace the	
violate statutes Deposi	We shall, commensurate will depository institution; and we st d, any applicable statute or regis, regulations, and policies of the t Insurance Corporation, or any affect our duties, responsibilities, tion.	hall not knoulation. We ne Office of state to when the contractions of the contraction with the contraction with the contraction of the contraction with the contraction of the contract	owingly vio e shall ensu the Comp nose jurisdi	plate, or willingly permit are that we learn of chan troller of the Currency, to action our association is	t to be ges in the Federal subject,	
stock tl	We are each the owner, in ghat the law requires. We have ding, and it is not hypothecated	either subsc	ribed for tl	nis stock or it is issued a	nd	
commi	We shall attend meetings of the board to which we	f the board are appoint	of directors ed.	s and participate fully or	ı all	
1	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
2	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
3	Signature	Post Of	Post Office or Mailing Address			
	Name (typed or printed)	City	State	ZIP Code		
4	Signature	Post Of	Office or Mailing Address			

_	Name (typed or printed)	City	State	ZIP Code		
·	Signature	Post Of	iling Address			
	Name (typed or printed)	City	State	ZIP Code		
•	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
•	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
·	Signature	Post Office or Mailing Address		iling Address		
	Name (typed or printed)	City	State	ZIP Code		
•	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
0	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
1	Signature	Post Office or Mailing Address				
	Name (typed or printed)	City	State	ZIP Code		
	I	Notary's A	ffirmation			
worn to b	pefore me and subscribed in	my present	ce, this	day of		
otary Pu	blic ission Expires					
y Comm	nission Expires					