

Liquidation—Final Report

Federal Branch, Limited Federal Branch, Federal Agency Identifying Information

OCC License No. _____ Date Liquidation Started _____
Date Liquidation Completed _____

Name _____
(*exact corporate title of bank*)
Address _____
(*office address, street, city, state, ZIP Code, country*)

Liquidating Agent/Correspondent Identifying Information

Name _____
Address _____
City _____ State _____ ZIP Code _____
Phone No. _____ Fax No. _____ E-Mail _____

[If applicable] The liquidation occurred because of an acquisition of the assets and liabilities by (*name the acquiring institution*).

I/We, the undersigned, being the (*liquidating agent/liquidating committee*), certify the attached* report of assets and liabilities to be a true statement, to the best of my/our knowledge and belief. Please release the Capital Equivalency Deposit (CED) held for the benefit of the OCC to (*name of foreign bank*).

Executed this _____ of _____, _____.

(Liquidating Agent) _____ (Correspondent for Committee)

(If there is a liquidating committee, every member should sign.)

*NOTE: The referenced report of assets and liabilities must be certified by a CPA and should reflect zero balances with the exception of the CED account.