
Bank Charter Signature Page

Applicant information:

Name of Proposed Bank:

Street Address:

City, County, State, and ZIP:

The bank is requesting trust powers: yes or no

Anticipated Effective Date:

Individual responsible for responding to questions relating to this application:

Name and Title:

Mailing Address:

Email:

Phone:

Authorization:

The undersigned hereby certify, jointly and individually, that the statements contained herein are true to the best of their knowledge and belief, and that they are made for the purpose of requesting the Minnesota Commissioner of Commerce to grant a bank charter. The undersigned must be two or more of the incorporators.

Name and Title:

Incorporator: yes or no

Signature: _____ Date:

Name and Title:

Incorporator: yes or no

Signature: _____ Date:

Name and Title:

Incorporator: yes or no

Signature: _____

Date:

Name and Title:

Incorporator: yes or no

Signature: _____

Date:

Name and Title:

Incorporator: yes or no

Signature: _____

Date:

Name and Title:

Incorporator: yes or no

Signature: _____

Date:

Name and Title:

Incorporator: yes or no

Signature: _____

Date:

This entire application file, including any related correspondence, are public under Minnesota law, with the following exceptions: 1) financial data on individuals; 2) trade secret data, as defined in Minn. Stat. § 13.37, subd. 1(b), if the applicant requests in writing a nonpublic classification; and 3) other data defined as not public pursuant to the Minnesota Government Data Practices Act. Any information deemed nonpublic by the applicant should be so labeled and submitted under separate cover. The decision as to whether such data is nonpublic will be made by the Department of Commerce.
