



STATE OF MISSOURI
DIVISION OF FINANCE
APPLICATION BY A STATE CHARTERED THRIFT

301 W. HIGH STREET
P. O. BOX 716
JEFFERSON CITY, MO 65102-0716
(314) 751-3242

APPLICATION FOR PERMISSION TO ESTABLISH A: (CHECK ONE)	
<input type="checkbox"/> BRANCH	<input type="checkbox"/> LOAN
<input type="checkbox"/> RELOCATION	<input type="checkbox"/> AGENCY
<input type="checkbox"/> OTHER _____	
APPLICANT INSTITUTION (Name and Home Office Address))	
PRESENT OFFICE LOCATION (Street Address or Nearest intersection, City, County, State)	PROPOSED OFFICE LOCATION (Street Address or Nearest intersection, City, County and State)
EXPECTED OPENING DATE:	
FUNCTIONS TO BE PERFORMED	
ESTIMATED VOLUME OF BUSINESS AT THE PROPOSED OFFICE	ESTIMATED ANNUAL EXPENSE AND MODE OF PAYMENT

<input type="checkbox"/> YES	<input type="checkbox"/> NO	WILL ESTABLISHMENT OF THE PROPOSED BRANCH OR CHANGE OF OFFICE LOCATION RESULT IN AN INVESTMENT WHICH EXCEEDS THE LIMITATIONS DEFINED IN 4 CSR 260-4.010(9) AND 12 C.F.R. 545.77?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	WILL OFFICE SPACE BE PURCHASED OR LEASED FROM AN AFFILIATED PERSON AS DEFINED IN 12 CFR 561.4
<input type="checkbox"/> YES	<input type="checkbox"/> NO	IS THE PROPOSED BRANCH OR CHANGE OF LOCATION TO BE LOCATED OUT OF STATE? IF YES, PLEASE PROVIDE LEGAL OPINIONS THAT EVIDENCE THE AUTHORITY TO BRANCH INTERSTATE.

IF OFFICE SPACE WILL BE LEASED, SUBMIT THE FOLLOWING INFORMATION:	
Annual Lease \$ _____	Term of Lease _____
Leasehold Improvements \$ _____	Options _____
Anticipated Additional Cost for Furniture, Fixtures and Equipment \$ _____	Term of Options _____
IF THE PROPOSED OFFICE WILL OCCUPY SPACE OWNED OR TO BE PURCHASED BY THE ASSOCIATION, SUBMIT THE FOLLOWING COST/APPRaisal INFORMATION	
Building \$ _____	If land is to be purchased, has it been appraised? <input type="checkbox"/> YES <input type="checkbox"/> NO
Land \$ _____	Fair Market Value \$ _____
Capital Improvements \$ _____	If land and building is to be purchased, has it been appraised? <input type="checkbox"/> YES <input type="checkbox"/> NO
Anticipated additional cost for furniture, fixtures and equipment \$ _____	Fair Market Value \$ _____



ATTACH A COPY OF THE APPLICANT'S CURRENT CRA STATEMENT AND ANY AMENDMENT NECESSITATED BY THE ESTABLISHMENT OF THE PROPOSED OFFICE. IF ANY PUBLIC COMMENT LETTERS HAVE BEEN RECEIVED REGARDING YOUR RECORD OF PERFORMANCE UNDER CRA SINCE YOUR LAST EXAMINATION, PLEASE PROVIDE A COPY OF SUCH LETTER(S) UNDER SEPARATE COVER.

ATTACH A BUDGET OF THE ASSOCIATION FOR THE CURRENT EARNINGS PERIOD AND FOR THE NEXT SEMIANNUAL PERIOD WHICH REFLECTS THE ADDITIONAL EXPENSE OF MAINTENANCE OF SUCH BRANCH OFFICE, LOAN OR AGENCY OFFICE. IF THIS APPLICATION INVOLVES A RELOCATION ONLY, DO NOT SUBMIT A BUDGET.

IF THIS IS AN AGENCY OFFICE APPLICATION, THE ASSOCIATION AND APPLICANT AGENT SHOULD FILE AN APPLICATION FOR AGENT'S LICENSE WITH THE DIVISION OF FINANCE.

IF THE APPLICANT HAS APPROVAL TO ESTABLISH AN OFFICE(S) THAT HAS NOT YET OPENED FOR BUSINESS, OR IF THE APPLICANT HAS ANOTHER APPLICATION PENDING TO ESTABLISH A BRANCH OFFICE OR AGENCY OFFICE, PROVIDE THE FOLLOWING:

PROPOSED LOCATION OF OFFICE	PENDING	UNOPENED	EXPECTED DATE OF OPENING	ESTIMATED COST OF ESTABLISHMENT OF OFFICE

RESOLUTION AND CERTIFICATION OF BOARD OF DIRECTORS

As the duly elected officials of the above association, we certify that at a legally held meeting of the Board of Directors, a resolution was passed directing the officers of the institution to prepare and file an application for permission to establish or relocate a branch or relocate a home office as required by the Division of Finance, State of Missouri and Office of Thrift Supervision.

The undersigned officials of the institution hereby attest to the adoption of the necessary resolution and certify to the correctness of all information submitted in support of this application.

PRESIDENT

SECRETARY

DATE