STATE OF WISCONSIN
Department of Financial Institutions

Division of Banking
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STOCKHOLDERS LIST

In conformity with the provisions of Sec. 221.1002(4), Wis. Stats., the following is a list of the stockholders of

_____ of _____, Wisconsin,
(Name of Bank) *(City)*

and the number of shares held by each as of _____ , 20_____.

Kind _____ Class _____ Series _____

No. of Shares _____ Par Value Per Share $_____ Total Amount $_____

NAME	RESIDENCE OR POST OFFICE ADDRESS	NUMBER OF SHARES

Section 221.1002(4), Wis. Stats.

NAME	RESIDENCE OR POST OFFICE ADDRESS	NUMBER OF SHARES

I, _____ , an officer of the above named bank, do solemnly swear that the foregoing is true to the best of my knowledge and belief.

_____ _____
(Signature) *(Title)*

STATE OF WISCONSIN
} ss.
COUNTY OF _____

Subscribed and sworn to before me on this _____ day of _____, 20_____.

_____ , Notary Public. My commission expires _____.