

**STATE OF NEBRASKA**  
**Department of Banking & Finance**

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**APPLICATION TO DECREASE CAPITAL STOCK**

Name and address of bank:

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Name

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Street Address

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City

County

State

Zip Code

1. Attach a copy of the stockholder meeting minutes that authorizes the proposed reduction of paid-in capital stock.
2. Provide information that verifies that the resulting paid-in capital stock will meet or exceed the minimum requirements of the Nebraska Banking Act and will not impair the security of the bank's depositors.
3. The bank must publish a notice containing a statement of the amount of any proposed reduction of paid-in capital stock for two weeks in some newspaper of general circulation in the county where the main office of the bank is located. Attach a copy of the proof of publication of the notice.
4. If the Department authorizes this request pursuant to Neb. Rev. Stat. § 8-128, the bank is required to notify the Department when the transaction has been consummated.

**CERTIFICATION**

The undersigned, being authorized by the stockholders of the above bank, makes application to the Nebraska Department of Banking and Finance to decrease the paid-in capital stock as disclosed within this document. I certify that the information contained herein is true, correct, and complete and is current as of the date of this submission. I acknowledge that any misrepresentation or omission of a material fact constitutes fraud and may subject me to legal sanctions.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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Signature (Authorized Officer)

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Print or Type Name

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Print or Type Title