



# STATE OF MONTANA

## DIVISION OF BANKING & FINANCIAL INSTITUTIONS

301 South Park, Suite 316

PO Box 200546

Helena, Montana 59620-0546

Phone: (406) 841-2920 Fax: (406) 841-2930

E-mail: [banking@mt.gov](mailto:banking@mt.gov) Website: [www.banking.mt.gov](http://www.banking.mt.gov)

### BANK MERGER APPLICATION

Any individual or entity desiring confidential treatment of specific portions of the application shall specifically identify the information for which they request confidentiality, separately bind it, and label it "confidential." The individual or entity shall follow the same procedure for a request for confidential treatment for the subsequent filing of supplemental information to the application.

The division prefers to receive documents electronically either via the State of Montana's secure file transfer service, [ePass Montana](#), or by another secure means of electronic transfer. Please bookmark the confidential sections.

Inquiries concerning the preparation and filing of this application should be directed to the division office at 406-841-2920 or [banking@mt.gov](mailto:banking@mt.gov).

1. State the exact corporate name and address of each bank and holding company participating in the merger, the name and address of every bank whose stock is owned by a participating bank holding company, the percentage of total voting stock which that holding represents, and the proposed names of the resultant bank and holding company.
2. State the name and address of, and the dates of publication in, the newspapers in which the required notice is published.
3. For the resultant bank, a list of the names of the directors and principal executive officers, their titles, and shares owned in the participating institutions and the resultant bank, including a brief resume of the educational background, banking experience, and other qualifications of each and explanation of the extent of common ownership, direct or indirect, or common management of the participating institution and the length of time such common ownership or management has existed.
4. The date on which the proposed merger is to occur.
5. Attach the following documents:
  - a. the resolution or an authentic copy of the resolution, authorizing the merger adopted by a majority of the board of directors and ratified by the consent in writing

- of the shareholders of each bank owning at least two-thirds of its capital stock outstanding;
- b. a year-end financial statement for each participating bank and/or a consolidated statement for multi-bank holding company;
  - c. a pro forma financial statement showing projected assets and liabilities, and first-year earnings for the consolidated organization; and
  - d. the proposed articles of merger and plan of merger.
6. An application fee of \$2,000 plus \$200 for each bank involved in the merger must be paid to the division at the time of application and may not be refunded in whole or in part.
  7. If an application is incomplete in any respect, or if additional information is required, the division shall notify the applicant and the applicant will be allowed up to 30 days in which to perfect the application or provide additional information. An extension of this 30-day period may be obtained from the division by showing good cause why it should be extended. The division may delay processing, including extending the comment period for good cause.
  8. The application must be in letter form addressed to the Commissioner of Banking and Financial Institutions, Department of Administration, P.O. Box 200546, Helena, MT 59620-0546.