DEPARTMENT OF ADMINISTRATION
DIVISION OF BANKING AND FINANCIAL INSTITUTIONS

BRIAN SCHWEITZER
GOVERNOR

MELANIE GRIGGS
COMMISSIONER

STATE OF MONTANA

301 SOUTH PARK, SUITE 316
HELENA, MT 59601

(406)841-2920
(406)841-2930 (FAX)

Date: _____

_____
Bank Name

_____
Mailing Address *City* *State* *ZIP*

BANK SEMI-ANNUAL ASSESSMENT
REPORT OF COMPUTATION AND REMITTANCE

In compliance with 32-1-213, MCA and ARM 2.59.104, _____ (*bank name*) hereby submits payment of the first/second (*circle one*) half of _____ (*year*) assessment computed as follows:

Total Assets as of _____ $_____

Use the appropriate **ONE** section below:

(1) Total assets under $1 million x .001275 $_____ (fee)

(2) First $1MM in assets $1,275.00

Next _____ in assets x .0001575 $_____

TOTAL .....$ _____(fee)

(3) First $10MM in assets $2,692.50

Next_____ in assets x .0001275 $ _____

TOTAL .....$ _____(fee)

(4) First $50MM in assets $7,792.50

Next _____ in assets x .000075 $ _____

TOTAL .....$ _____(fee)

(5) First $100MM in assets $11,542.50

Next _____ in assets x .000045 $_____

TOTAL .....$_____(fee)

_____ _____
Name of Individual Completing Report Date

_____
Title