



Order Forms—FR MM – Form OF

The information in this form is required by law: 12 CFR Part 239 (Mutual Holding Companies).

specified in this form in connection with requests from savings associations to conduct mutual holding company reorganizations.¹

The Federal Reserve System ("FRS") will use the information

The undersigned hereby certifies that the attached information is consistent with information contained in other documents that are required pursuant to Regulation MM (e.g., business plan, stock issuance plan, plan of conversion, reorganization plan, proxy soliciting materials).

Name of Applicant

Street Address

City State Zip Code

Date of Application:

Month / Day / Year

Does applicant request confidential treatment for any portion of this submission?

Yes

As required by the General Instructions, a letter justifying the request for confidential treatment is included.

The information for which confidential treatment is being sought is separately bound and labeled "Confidential."

No

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¹ Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time to gather and maintain data in the required form, to review instructions and to complete the information collection. The FRS may not conduct or sponsor, and an organization is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; and to the Office of Management and Budget, Paperwork Reduction Project (7100-0121), Washington, DC 20503.

