

PLEASE COMPLETE ONE FORM FOR EACH OFFICER OR DIRECTOR APPOINTED OR ELECTED SINCE THE LAST STATE EXAMINATION.

STATE OF KANSAS
 OFFICE OF THE STATE BANK COMMISSIONER
DIRECTOR/OFFICER BIOGRAPHY (CONFIDENTIAL)

Please print or type answers.

Please use separate sheets or additional copies of this form, if necessary.

NOTE # May be completed by institution employee.			
INSTITUTION NAME		PREPARED BY	INFORMATION AS OF
NAME			DATE OF BIRTH
ADDRESS (STREET, CITY, STATE, ZIP)			
OCCUPATION		TITLE	EDUCATION (DEGREE) #
NAME OF COLLEGE #		LOCATION #	
NUMBER OF YEARS A RESIDENT OF THIS COMMUNITY		DATE ELECTED TO BOARD	AND/OR EMPLOYED BY INSTITUTION
NUMBER OF SHARES OWNED (INSTITUTION OR HOLDING COMPANY)	CURRENT ANNUAL SALARY		LAST YEAR'S BONUS
PREVIOUS EMPLOYMENT #			
NAME OF COMPANY	LOCATION	TITLE	NO. OF YEARS EMPLOYED
			FROM TO
			FROM TO
			FROM TO
IN WHAT CIVIC ORGANIZATIONS AND/OR ACTIVITIES DO YOU PARTICIPATE?			
OFFICERS ONLY			
DATE PROMOTED TO PRESENT POSITION _____		DESCRIBE PRINCIPAL DUTIES	
DIRECTORS ONLY			
NET WORTH (AMOUNT) Please provide copy of statement	DATE OF STATEMENT	a. IF STATEMENT NOT ON FILE, GIVE ESTIMATE OF NET WORTH	
b. BY WHOM ESTIMATED			
IN WHAT SPECIFIC AREAS DO YOU BELIEVE YOUR PARTICIPATION AS A DIRECTOR BENEFITS THIS INSTITUTION?			
MISCELLANEOUS COMMENTS			
PREPARED BY			