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Name of Financial Institution

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Address

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**CERTIFICATE OF ELECTION OF DIRECTORS**

**AND**

**DIRECTORS SUBSCRIPTION TO OATH OF OFFICE**

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\_\_\_\_\_ 20\_\_\_\_

Received and filed

\_\_\_\_\_ 20\_\_\_\_

**RHODE ISLAND FINANCIAL INSTITUTION  
CERTIFICATE OF ELECTION OF DIRECTORS**

The undersigned \_\_\_\_\_ Secretary of  
the \_\_\_\_\_  
(Name of Financial Institution)  
located in \_\_\_\_\_, Rhode Island, hereby  
certifies that at a meeting of the \_\_\_\_\_  
(Stockholders, Incorporators, whichever is applicable)  
of said Corporation, held on \_\_\_\_\_  
the following named persons were elected Directors thereof for the ensuing year, and that such election has been  
duly recorded in the records of said Corporation.

Name	Place of Residence
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	

\_\_\_\_\_ { Secretary-Clerk

**FINANCIAL INSTITUTION  
DIRECTORS OATH OF OFFICE**

STATE OF RHODE ISLAND,

County of \_\_\_\_\_ }

We, the undersigned Directors of the \_\_\_\_\_

(Name of Financial Institution)

in \_\_\_\_\_, Rhode Island, do each for himself and not for the other, solemnly swear that we will severally, so far as the duty devolves upon us, diligently and honestly administer the affairs of said Corporation, and that we will not knowingly violate, or willfully permit to be violated, any of the applicable provisions of Title 19 of the General Laws of Rhode Island and/or other General Laws of Rhode Island applicable to the operations of financial institutions, or any addition thereto or amendment thereof.

Name	Place of Residence
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	

Subscribed and sworn to this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
before the undersigned, a notary public in and for said State.

\_\_\_\_\_  
Notary Signature