FOREIGN BANKS REGISTRATION OF SERVICE FACILITY

NAME OF FOREIGN BANK _____

Location of Principal United States Office

Street Address		
City, State, Zip		
Contact Person		
Contact Person's Title		
Contact Person's Phone Number		

LOCATION OF SERVICE FACILITY IN NEW JERSEY

Street Address		
City, State, Zip		
Contact Person		
Contact Person's Title		
Contact Person's Phone Number		
Describe Activity		
being conducted		
at Service Facility		
Number of employees at Service Facility	# FULL TIME EMPLOYEES	# PART-TIME EMPLOYEES

AGENT FOR SERVICE OF PROCESS

Name of Agent	
Address of Agent (City, State Zip)	
reduces of rigent (enty, state Zip)	
Phone Number of Agent	

OTHER COMMENTS