QUARTERLY REPORT OF MONTHLY CAPITAL EQUIVALENCY								
Name of	Agency	:						
Agency Number:			Quarter Ending:					
Depository Bank:								
(Dollar Amounts in Thousands)								
	Averages for Month (From OFR-U-53)							
(1) Months	or Secu Depo	(2) Balance of Deposits or Investment Securities with Depository Bank (Minimum \$4,000,000)		(3) Liabilities			(4) Capital Equivalency Ratio (2) / (3) Minimum 0.07	(5) Capital Equivalency Deficiency (If Any) \$
	Bil	Mil	Thous	Bil	Mil	Thous		
1.								
2.								
3.								
CERTIFIC	CATION:	I her	eby cert	ify th	at thi	s report	is true and c	correct.
SIGNATUR	Œ:							
TITLE:								
INSTRUCTIONS								
1. Insert the reference months for the quarter in rows 1, 2, and 3								
2. Insert Column (A) Averages from page 2, OFR-U-53.								
3. Insert Column (B) Averages from page 2, OFR-U-53.								
4. Insert Column (C) Averages from page 2, OFR-U-53.								
5. Inse	ert Col	umn (E)	Average	s from	page	2, OFR-U	J-53 .	

Submit this report to:

Office of Financial Regulation

200 E. Gaines Street

Tallahassee, Florida 32399-0371

OFR Use Only				
Verification of Calculation				
() YES	()	NO	
Other Action:				
Initials:				

List capital equivalency dollar deposits and investment securities held at the close of the calendar quarter. The securities must be in accordance with investments permitted under Section 658.67, Florida Statutes.

1.	Dollar	Deposits	\$
		·	

2. Investment Securities:

Description	Market Value (A)	Book Value (B)
3. Total Investment Securities	\$ (A)	\$ (B)
4. Dollar Deposits and B (Item 1 + Item 3)	\$	