



TEXAS DEPARTMENT OF BANKING
REQUEST LIST FOR
EXAMINATION OF SMALL TRUST DEPARTMENTS
(Total Fiduciary Assets Under \$100 Million)

(insert name of entity here)

The following is a list of documents that will be used in the examination of your institution. Only those items marked with an **X** are required to meet the planned scope of this examination. Examiners will need either: (1) an electronic **copy** of a requested item for examination work papers; or, (2) **access** to the referenced information sometime during the onsite review, unless otherwise instructed. **To help expedite the examination process, please provide the name and number of the employee who may be contacted for each item requested.** Optional forms have been attached to the request list to facilitate transmittal of certain information. However, in all cases, if your institution has the requested information available in another format, examiners will use the internally generated document as long as the information can be readily verified and converted to the examination format.

Please submit the electronic documents, including this list with contacts identified, using the Department's upgraded Data Exchange System (**DEX 2.0**) which is accessed from the [Entity Log In](#) page of the Department website. Once you are logged in, select "Specialty Examinations" and then "Trust Examination Documents." You will find folders where you can upload your documents. Each folder relates to a section of this Request List.

The following dates are relevant for the purposes of this request:

Examination Commencement Date:	(ECD)	(Date)
Account Trial Balance Date:	(ATB)	(Date)
Financial Information Date:	(FID)	(Date)
Last Examination Date:	(LED)	(Date)

#15- SMALL TRUST DEPARTMENTS (FIDUCIARY ASSETS OF LESS THAN \$100 MILLION)				
X	ITEM	AS OF	COPY OR ACCESS	CONTACT PERSON (Name and Number)
X	15-A. Detailed general ledger and income statement.	FID	Copy	
X	15-B. Officer's Questionnaire (Form attached)	FID	Signed Original	

**#15- SMALL TRUST DEPARTMENTS
(FIDUCIARY ASSETS OF LESS THAN \$100 MILLION)**

X	ITEM	AS OF	COPY OR ACCESS	CONTACT PERSON (Name and Number)
X	15-C. All policy and procedures manuals, disaster recovery plan, and strategic plan.	Most Recent	Copy of Strategic Plan / Access for Others	
X	15-D. Shareholders' minutes.	Since LED	Copy	
X	15-E. List of members of the Board of Directors (Form #15-E)	Most Recent	Copy	
X	15-F. List of Executive officers (Form #15-F)	ECD	Copy	
X	15-G. List of trust committee members (Form # 15-G)	ECD	Copy	
X	15-H. Board of Directors' minutes	Since LED	Copy	
X	15-I. Board meeting packet	Most Recent	Copy	
X	15-J. Trust Committee minutes and all other trust function-type committees. (Do not include attachments.)	Since LED	Copy	
X	15-K. External and/or Internal Fiduciary Audit, management letter and engagement letter.	Most Recent	Copy	
X	15-L. Reconcilements for the trust company's demand deposit account and/or operating accounts for fiduciary activities.	Last 3 Months	Access	
X	15-M. Provide a confirmation from each institution holding assets and a reconciliation of the confirmations to total fiduciary assets. (Utilize either location code report for unit reconciliation or the master asset listing for the reconciliation of book value or cost.)	ATB	Copy	
X	15-N. List of all suspense accounts and reconciliation of each.	ATB	Copy	

**#15- SMALL TRUST DEPARTMENTS
(FIDUCIARY ASSETS OF LESS THAN \$100 MILLION)**

X	ITEM	AS OF	COPY OR ACCESS	CONTACT PERSON (Name and Number)
X	15-O. List of large cash balances and overdrafts. (The list should include the name, account number, amount, and date of occurrence.)	ATB	Copy	
X	15-P. Budget for current fiscal year	ECD	Copy	
X	15-Q. Prior year-end and current year-to-date detailed income/expense statement compared to budget	ECD	Copy	
X	15-R. List of securities/equities approved for purchase, retention, and/or sale. (Approved Buy/Sell List).	ECD	Copy	
X	15-S. List of corporate insurance policies including Trust Errors & Omissions, Financial Institutions Bond and any other Fiduciary coverage.	ECD	Access	

**#15- SMALL TRUST DEPARTMENTS
(FIDUCIARY ASSETS OF LESS THAN \$100 MILLION)**

X	ITEM	AS OF	COPY OR ACCESS	CONTACT PERSON (Name and Number)
X	<p>15-T. Order an “Audit Package” from your data processor which contains the following fiduciary reports at a minimum:</p> <ul style="list-style-type: none"> (a) Trial balance by account type with totals for each type and overall totals at the end (e.g., personal, employee benefit, corporate, etc. The list should include the name, account number, income cash, principal cash, and total investments per account.) (b) Master property list, including name of asset, number of par/share units held, book value and market value with totals for each asset type and overall totals at the end [broken down by type of asset (cash, U. S. Gov't, municipals, equities, closely-held, real estate, oil and gas, unique, etc.) is preferred]. (c) Holder's list of each asset. (The list should be in the same order and include the same assets and same information as the master property list). (d) Account holdings by asset including account number, name, type of assets, listing of assets, number of par/share/units, book value and market value with totals. (Security Cross-Reference including unique assets or Portfolio listing). 	ATB	Copy	

TEXAS DEPARTMENT OF BANKING TRUST EXAMINATION REQUEST LIST

Form#15-E

Directors

Name Address City, State, Zip	Year of Birth	Net Worth (000's) (as/of)	Position & Principal Business Affiliations	Year Elected to Board	Year Joined the Trust Dept.*	# of Shares Owned	Board Fees/ Benefits

*Enter year for Directors that are also Trust Officers.

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Form#15-F
Executive Officers

Name & Title / Time Devoted (% of week)	Date of Birth	Area of Responsibility	Year Joined Trust Dept.	Years in Current Position	Compensation Salary (S) Bonus (B) Other Benefits
TOTAL NUMBER OF OFFICERS LISTED ABOVE:		SUBTOTAL OF SALARIES FOR OFFICERS LISTED ABOVE:	\$		
TOTAL OTHER STAFF EMPLOYEES & JR. OFFICERS:		SUBTOTAL OF SALARIES FOR OTHER STAFF EMPLOYEES:	\$		
TOTAL SALARIES				\$	

**TEXAS DEPARTMENT OF BANKING
TRUST EXAMINATION REQUEST LIST**

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Form #15-G Trust Committees

Name of Committee _____	Principal Function of the Committee:			No. of Meetings Since Last Examination _____ No. of Members _____
Names of Committee Members	Birth Year	Year Joined Trust Dept.*	Salary / Meeting Attendance Fee	Principal Business Interest(s)

*Include this date for committee members that are not already listed on the Directors or Executive Officers forms.