

ARTICLES OF INCORPORATION

We, the undersigned, all being of full age and residing in the State of Illinois, and being members of the specific group hereinafter named, for the purpose of becoming incorporated as a Credit Union, pursuant to the provisions of an Act, entitled "The Illinois Credit Union Act," approved August 30, 1979 and in force January 1, 1980, and as hereby amended, do hereby certify:

- 1. That the name of the proposed corporation shall be:

_____ Credit Union.

- 2. That the location of the proposed Credit Union shall be:

- 3. That the membership is limited to: (membership must be confined to one or more of the three following described groups):

- (a) An association, group or organization, give name:

Number of members: _____

Eligibility requirements:

- (b) A common employer or organized labor union, occupation or professional group - give name, union, or group:

Defined geographical area:

- (c) A neighborhood, community, or rural district, define exact geographical limits:

Member:

<u>6.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....
Member:

<u>7.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....
Member:

<u>8.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....
Member:

<u>9.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....
Member:

<u>10.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....
Member:

<u>11.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....
Member:

<u>12.</u> Hon. (Mr., Mrs., Ms.) First & Last Name	_____	_____	_____
	Address		City, State & Zip
Home Phone	_____	_____	_____
	SSN		Pledged Shares/Value

.....

IN WITNESS WHEREOF, We have made, signed and acknowledged this certificate in duplicate, by the terms of which we agree to be bound, this _____ day of _____, 20_____.

1. _____

10. _____

2. _____

11. _____

3. _____

12.. _____

4. _____

13. _____

5. _____

14. _____

6. _____

15. _____

7. _____

16. _____

8. _____

17. _____

9. _____

18. _____

STATE OF ILLINOIS)
)
County of _____) SS
)
City of _____)

On this _____ day of _____, 20_____, the above listed persons personally appeared before me to be known to be the persons described in and who executed the foregoing certificate and severally acknowledged that they executed the same for the uses and purposes therein set forth.

Notary Public

(Seal)