REGISTRATION OF OUT OF STATE CREDIT UNIONS

NOTICE OF CHANGE IN COMMON BOND/FIELD OF MEMBERSHIP/ CHANGE IN LOCATION OF BRANCH OR SERVICE CENTER OR CLOSURE OF A BRANCH WITHIN THE STATE OF ILLINOIS

Name of Credit Union: _____

a) Change in Common Bond/Field of Membership:
(Indicate any additions, deletions or changes to your common bond/field of membership since your original registration of an out of state credit union)

Addition ☐ Deletion ☐ Other ☐
(List all details list specifics below or attach/include a separate sheet)

_____
_____
_____
_____

b) Change in location for any branch or service center:

Original proposed location:

Address: _____ City: _____ Zip: _____

Actual location:

Address: _____ City: _____ Zip: _____

Phone: _____ Proposed date to open: _____

c) New or Additional Branch to be located within the state of Illinois:

Address: _____ City: _____ Zip: _____

Phone: _____ Proposed date to open: _____

d) Closure of a Branch within the State of Illinois

Address: _____ City: _____ Zip: _____

Date closed _____