

**MERGER PLAN  
AND MISCELLANEOUS INFORMATION**

Regarding the proposed merger of \_\_\_\_\_ Credit Union, Inc. with \_\_\_\_\_  
Credit Union, Inc.

Please supply the information requested below.

1. Estimated effective date of merger \_\_\_\_\_.
2. What is the reason for this merger (e.g. to expand services, sponsor plant closing)?
3. Are any share adjustments proposed?     Yes         No  
(If yes, explain)
4. What common bond exists between the Merging and Continuing Credit Union?  

<input type="checkbox"/>	occupation	(e.g., same sponsor)
<input type="checkbox"/>	association	(e.g., same trade union)
<input type="checkbox"/>	community	(where at least one of the credit unions is a community charter)
<input type="checkbox"/>	general locality	(if checked, provide an explanation including the approximate distance between the merging credit union and the nearest office, main or branch, of the continuing credit union)
5. Where the Merging Credit Union is a federal credit union, is the Merging Credit Union requesting a waiver of its membership?  Yes     No (If yes, explain. The Department of Financial Institutions may permit the merger to become effective without an affirmative vote of the membership of the Merging Credit Union only when the Merging Credit Union is insolvent or in danger of insolvency.)
6. Where the Continuing Credit Union is a federal credit union, what is the proposed amendment to the charter of the Continuing Credit Union?
7. What agreements have been reached as to arrangements for notifying and paying creditors of the Merging Credit Union?
8. How does the Continuing Credit Union propose to service the membership of the Merging Credit Union (e.g., by mail, by establishing a branch office or by using an existing office)?

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9. Where the Merging Credit Union is a state credit union and the Continuing Credit Union is a federal credit union, and the Merging Credit Union has assets or liabilities which do not conform to federal requirements, what actions will be taken to eliminate the nonconformity?
  
10. Where either the Continuing or Merging Credit Union is a state credit union, will there be any changes relative to insurance of member accounts?
  
11. Please list any other agreements reached between the Continuing and Merging Credit Unions. For example, what provision has been made for the payment of dividends, if any, to the members of the Merging Credit Union? Will a verification of the Merging Credit Union's accounts, or an audit of the Merging Credit Union's records be required in conjunction with the merger? Will there be any changes in the existing board of directors or committees of the Continuing Credit Union as a result of the merger? What provision(s), if any, will be made for the employees, if any, of the Merging Credit Union after the effective date of the merger?
  
12. Please list any ongoing contracts for goods or services (i.e., data processing, computer hardware and/or software maintenance, management contracts) into which the Merging Credit Union has entered and what provisions, if any, have been made for voiding or satisfying said contracts.

**CERTIFICATION OF THE  
PLAN OF MERGER**

The Board of Directors of \_\_\_\_\_ Credit Union, Inc., (hereinafter called the Merging Credit Union) and the Board of Directors of \_\_\_\_\_ Credit Union, Inc. (hereinafter called the Continuing Credit Union) agree to terms and conditions of the merger of the credit unions. A quorum of each board cast the following votes approving the merger plan as described herein.

For the Merging Credit Union:	For _____	Against _____
For the Continuing Credit Union:	For _____	Against _____

**CERTIFICATION**

We, the undersigned Chairman of the Board and Secretary/Treasurer of \_\_\_\_\_ Credit Union, Inc., and Chairman of the Board and Secretary/Treasurer of \_\_\_\_\_ Credit Union, Inc., hereby certify to the Commissioner of the Department of Financial Institutions, and the Secretary of State of the Commonwealth of Kentucky that the foregoing is true.

For \_\_\_\_\_ Credit Union, Inc.

_____ Chairman of the Board	_____ Date
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_____ Secretary/Treasurer	_____ Date
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For \_\_\_\_\_ Credit Union, Inc.

_____ Chairman of the Board	_____ Date
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_____ Secretary/Treasurer	_____ Date
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