

6. What is the distance between the select group's work/meeting place and the nearest credit union office? _____

The nearest credit union office is: **the home office** **a service facility** (check one)

If the nearest office of the credit union is a service facility, please indicate the address of that office:

| | | | |
|--------|--------|--|----------|
| Number | Street | | |
| City | State | | Zip Code |

7. Will the credit union be offering payroll deduction services to the group? **Yes** **No**

8. Does the addition of the select group involve expansion of the credit union's services beyond the boundaries of the State of Ohio?
 Yes **No**

If "yes" please list which state(s) would be affected: _____

CERTIFICATION, SIGNATURE AND TITLE OF CREDIT UNION OFFICIAL

I, the undersigned officer of the above-named credit union, do hereby certify to the Ohio Division of Financial Institutions that, by the affirmative vote of _____ members of the Board of Directors at a meeting held on the _____ day of _____, 19____, at which a quorum was present, a resolution was approved authorizing the above-named select group to be included within the credit union's field of membership.

| | | |
|-----------|-------|------|
| Signature | Title | Date |
|-----------|-------|------|