Office of Credit Unions P.O. Box 14137 Madison, WI 53708-0137 Telephone: (608) 261-9543 Fax: (608) 267-0479 dfi.wi.gov

State of Wisconsin Department of Financial Institutions



Administrative List Instructions

After you have held the Organizational Meeting of your Board of Directors (which follows the Annual Meeting of your members), please complete the Administrative List for the current year and send it to the Office of Credit Unions via email to <u>DFI-OCU@dfi.wisconsin.gov</u>

Both the National Credit Union Administration and the Wisconsin Credit Union League have their own listing that they require also, but this information *is not* shared between agencies. It is important that the Administrative List be returned to our office.

Promptly notify the Office of Credit Unions of any changes made in the President/Manager, Treasurer, or Chairperson of the credit union any time during the year.

Changes affecting the directors, committee members, or employees need not be reported to this office. Also, our office needs to be made aware of any changes in the address of your credit union office of the location of your records.

Notice: This form may be used for updating the Office of Credit Unions database. Information requested may be used for secondary purposes. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

State of Wisconsin Department of Financial Institutions



Administrative List

General Information					
NCUA #:	Credit Union Name:				
Mailing Address:					
City: Zip		Zip Code: Physic		cal Address:	
Phone #:	Ext:	Ext: FAX		#:	
Business Hours:	Credit Union Website A		te Addres	.ddress:	
Secondary Email Address for General Information: (optional)				Date of Annual Meeting:	
Management					
President:			Emai	Email:	
Home Address:			Phon	Phone #:	
Vice-President			Emai	Email:	
Home Address:			Phon	Phone #:	
Vice-President			Emai	Email:	
Home Address:			Phon	Phone #:	
Vice-President			Emai	Email:	
Home Address:			Phon	Phone #:	
Vice-President			Emai	1.	
Home Address:			Phon	e #:	

Board of Directors		
Chairperson:	Term Expires:	Email:
Home Address		Phone #:
		1
Vice-Chairperson:	Term Expires:	Email:
Home Address		Phone #:

Board of Directors, continued		
Treasurer:	Term Expires:	Email:
Home Address		Phone #:
Secretary:	Term Expires:	Email:
Home Address		Phone #:
Director:	Term Expires:	Email:
Home Address		Phone #:
Director:	Term Expires:	Email:
Home Address		Phone #:
Director:	Term Expires:	Email:
Home Address		Phone #:
Director:	Term Expires:	Email:
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Director:	Term Expires:	Email:
Home Address		Phone #:

Director:	Term Expires:	Email:
Home Address		Phone #: