OMB Number: 31	33-0061
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(For Internal Use only	()
Application Number:	
Date Received::	
Received by:	

## APPENDIX C-3 **REQUEST FOR FUNDS NATIONAL CREDIT UNION CENTRAL LIQUIDITY FACILITY**

1)	Name of Credit Union:							
2)	Identification Number: (Enter Charter/ Insurance number)							
3)	Person Requesting Funds:							
	(Mus	st be person authorized by the B	Board of Directors to transact business with the Fac	cility.)				
4)	Provide a complete statement of the specific PURPOSE for the request and the nature of the conditions which support the purpose. Be specific and attach additional information or continue on another page:							
5)	Amount of Funds requested: _							
6)	6) When do you expect to need the funds? (Provide a specific date or dates and amounts required on the stated dates if funds are to be advanced over a period of time rather than in one lump sum):							
7)	When do you expect to repay the	he funds requested? (P	rovide a specific maturity period & o	date of expected payment.)				
8)	Maturity period: How will the loan be repaid? Finecessary.	rovide the specific sou	Date to be repaid: rce of repayment and repayment plan	n. Attach additional sheet if				
9)	Has the credit union agreed or of any such commitments inclu			s □No (Provide details				
1.0		4 4	C. II	<u> </u>				
10)	o Categorize your borrowing from notes to individual, lump the to		following schedule. If your credit un anding by maturity category. Assets Pledged:	nion issues promissory				
			Description	Book Value				
a.	Maturity 180 days or less	\$		\$				
b.	Maturity 181 days to 1 year	\$		\$				
c.	Maturity greater than 1 year	\$		\$				
	TOTALS	\$		\$				

NCUA - 7001 Revised 5/10/95

## **APPENDIX C-3**

11) Check additional information attached to this application which support the request. *Required with all requests unless previously submitted to the CLF.								
_*	A financial statement, income & expense statement for the previous monthend and as of the monther period. The total dollar amount of delinquent log 12, and 12 months and over should be attached it statistical report. (if the request is filed after the month, the financial statements submitted must be previous monthend.)	nd for the latest dividend ans by categories 2-6, 6- f not included on the 15th day of the current	Cash Flow Projections. To be submitted for requests with maturity over 90 days or if the repayment source cannot be clearly explained in items 7 and 8. Projections will be provided for each monthend through the maturity date of the loan or for a 6-month period, whichever is less. An equivalent form/report may be submitted.					
_*	Resolution of the Board of Directors to borrow f	unds.						
_*	Note, security agreement, and credit reporting agestatement of cash receipts & disbursements. To be with maturity over 90 days or if the repayment so explained in items 7 and 8. Information will be reported for receipts and disbursements for the current months. An equivalent form/report may be submonths.	be submitted for requests purce cannot be clearly reported on the statement onth and the preceding 3	Seasonal Flow Computation. Will be provided for the 2 calendar years prior to the year in which the request is made. Seasonal credit requests will be made annual					
12)	Signature of Requestor		Title	Date				
(For internal use only)								
Requ		Amount:						
[	□ Denied	Reason: By: Date:						
Com	aments:							