

# CREDIT UNION NATIONAL ASSOCIATION, INC.

## NOMINATION & CONSENT FORM CLASS D CUNA DIRECTOR FROM DISTRICT #6

NOMINATIONS MUST BE RETURNED TO  
CREDIT UNION NATIONAL ASSOCIATION, INC.  
ATTENTION: OFFICE OF CORPORATE SECRETARY  
5710 MINERAL POINT ROAD  
MADISON, WI 53705  
Fax: 608/231-4874 or E-mail: thanson@cuna.coop  
AND RECEIVED NO LATER THAN October 16, 2009.

In accordance with the prescribed procedures, \_\_\_\_\_ Credit Union,  
of \_\_\_\_\_ (State), places in nomination for Director of Credit Union National  
Association, Inc. \_\_\_\_\_ (Name), and certifies  
that the same technique was used to calculate the credit union's members as reported on both the  
December 31, 2008 and June 30, 2009 NCUA Call Reports.

### Nominee's Consent

I, \_\_\_\_\_, have examined the information on this form, confirm  
that it is correct and that I am an employee or voting board member of the nominating credit  
union, that I have consent of the above credit union, and hereby consent to being nominated  
to the above position.

\_\_\_\_\_  
(Nominee's Signature)

\_\_\_\_\_  
(Date)

Confirmed by \_\_\_\_\_  
(Signature)

Position at Nominating  
Credit Union \_\_\_\_\_  
(Chairman or Secretary)

For Corporate Governance Committee use only to verify eligibility.

	<u>Class</u>	<u>District</u>	<u>Affiliation</u>	<u>12/08</u>	<u>6/09</u>
Nominator	_____	_____	_____	_____	_____
Seconder	_____	_____	_____	_____	_____
Seconder	_____	_____	_____	_____	_____

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

**CREDIT UNION NATIONAL ASSOCIATION, INC.**

**NOMINATION SECONDING FORM  
CLASS D CUNA DIRECTOR FROM DISTRICT #6**

**SECONDS MUST BE INCLUDED WITH THE NOMINEE'S NOMINATION FORM AND MUST BE FROM THE SAME CLASS AND DISTRICT AS THE NOMINATING CREDIT UNION.**

In accordance with the prescribed procedures, \_\_\_\_\_ Credit Union, of \_\_\_\_\_ (State), seconds the nomination of

Name \_\_\_\_\_

Credit Union \_\_\_\_\_

as a candidate for the CUNA Board of Directors.

By \_\_\_\_\_  
(Signature)

Position at Seconding  
Credit Union \_\_\_\_\_

Date \_\_\_\_\_

**CREDIT UNION NATIONAL ASSOCIATION, INC.**

**NOMINATION SECONDING FORM  
CLASS D CUNA DIRECTOR FROM DISTRICT #6**

**SECONDS MUST BE INCLUDED WITH THE NOMINEE'S NOMINATION FORM AND MUST BE FROM THE SAME CLASS AND DISTRICT AS THE NOMINATING CREDIT UNION.**

In accordance with the prescribed procedures, \_\_\_\_\_ Credit Union, of \_\_\_\_\_ (State), seconds the nomination of

Name \_\_\_\_\_

Credit Union \_\_\_\_\_

as a candidate for the CUNA Board of Directors.

By \_\_\_\_\_  
(Signature)

Position at Seconding  
Credit Union \_\_\_\_\_

Date \_\_\_\_\_

