Certification of No Non-Disclosed Merger-Related Financial Arrangements

We, the undersigned officials of _____ Credit Union and _____ Credit Union, certify to the National Credit Union Administration (NCUA) as follows:

1. The information provided to the NCUA in the merger application, and the proposed disclosure to the members of _____ Credit Union includes a complete, true, and accurate statement about all merger-related financial arrangements, if any, provided to covered persons, as those terms are defined in Part 708b of the NCUA's regulations.
2. We understand that we have an affirmative duty to revise our merger application and the notice to the members of _____ Credit Union if merger-related financial arrangements are added or increased after our application is submitted**.**

Name of Continuing Credit Union

_____ _____

Board Chair of Continuing Credit Union Date

_____ _____

CEO of Continuing Credit Union Date

Name of Merging Credit Union

_____ _____

Board Chair of Merging Credit Union Date

_____ _____

CEO of Merging Credit Union Date