



## Registration of Out of State Credit Unions

### Section 190.220 Registration of Out of State Credit Unions

A credit union organized and duly chartered as a credit union in another state shall:

- a) Register with the Secretary prior to operating in this State, on a form specified by the Secretary, which shall include or be accompanied by the following information:
  - 1) The name of the credit union and the county or state under which it is organized;
  - 2) The common bond or field of membership the credit union is authorized to serve;
  - 3) The proposed location of any branch or service center within this State; and
  - 4) The credit union's most recent examination report and audited financial statement.
- b) Update the information provided under subsection (a)(2) within 30 days after receiving approval of a change in common bond or field of membership from the credit union's chartering agency, on a form specified by the Secretary.
- c) Update the information provided under subsection (a)(3) as to any proposed change in location or additional location for any branch or service center within this State, on a form specified by the Secretary.
- d) Pay to the Director an annual registration fee of \$1,000, plus \$250 for each branch facility located in Illinois. The fee shall be payable to the Secretary by January 1 of each calendar year, for the current calendar year.

Submit the completed application and required documentation via email to the Credit Union Section's email address listed below. Payment can be mailed to the Department at the address listed below.

For additional information, please contact the Credit Union Section.

IDFPR  
Division of Financial Institutions  
Credit Union Section  
320 W. Washington, 2<sup>nd</sup> Floor  
Springfield, IL 62786

Email: [FPR.CreditUnion@Illinois.gov](mailto:FPR.CreditUnion@Illinois.gov)  
Phone: (217) 782-2834  
Fax: (217) 557-8461



# IDFPR

Illinois Department of  
Financial and Professional Regulation

Division of Financial Institutions

www.idfpr.com

**JB PRITZKER**  
Governor

**MARIO TRETO, JR.**  
Secretary

**FRANCISCO MENCHACA**  
Director

**Credit Union's Name:**

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**Address:**

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**City:**

**State:**

**Zip:**

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**Main Phone Number:**

**Main Fax Number:**

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**Website Address:**

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1)

### **Primary Contact Information**

**Contact Name:**

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**Title:**

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**Phone Number:**

**Fax Number:**

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**e-Mail Address:**

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- 2) **Provide a copy of the most current Common Bond / Field of Membership approved by the credit union's Regulator.**

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- 3) **Provide a list, on credit union letterhead, that lists all the physical locations (address, city, state, ZIP code) of any branch(s) or service center(s) located in Illinois.**

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- 4) **Include a copy of the credit union's most recent examination report and audited financial statement.**

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Each December the Department sends out the following year's invoice to be registered as an Out of State Credit Union.

5)

**Please provide at least one email address to where the invoice can be sent.**

**e-Mail Address:** \_\_\_\_\_