

# Template: Acknowledge Complete Application for Change of Officials

Date

Mr. John Doe  
Board Chairperson  
ABC Federal Credit Union  
Address  
City, State Zip

Dear Mr. Doe:

On [date], we received your request regarding the approval of [name] for the position of [POSITION] at [CU NAME].

We are processing your request pursuant to the National Credit Union Administration rules and regulations §701.14. We will advise you of our decision by [30 DAYS FROM WHEN THE Regional Office RECEIVED THE COMPLETE PACKAGE]. Please contact examiner [examiner name] at [phone number] with any questions.

Sincerely,

[NAME]  
Director of Supervision

[Office]/[WRITER'S INITIALS]  
SSIC XXXX  
Charter #

cc: SE  
EX  
SSA (when applicable)