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| **REGIONAL SUMMARY**  **Investment Pilot Program** | |
| **Charter Number** |  |
| **Credit Union Name** |  |
| **SE/EX/RCMS Names** |  |
| **CAMEL Rating / Effective Date** |  |
| **Financial Data Date** |  |
| **Total Assets** |  |
| **Total Shares and Retained Earnings** |  |
| **Net Worth Ratio** |  |

**Examiner Comments**

* **§703.19 Required Information** - *Completeness of the information supporting the request*
* **CAMEL and Risk Ratings** - *Most recent examination CAMEL ratings* and m*ajor areas of risk and their respective ratings (strategic, credit, interest rate, liquidity, compliance, transaction, and reputation) from the most recent examination including the weaknesses or problems noted.*
* **Board and Senior Management Capabilities** - *Credit union’s board, senior management, and the staff’s capabilities of managing and monitoring the proposed investment activities.*

**Supervisor Comments**

**Analyst Comments**

**APPROVAL/DENIAL RECOMMENDATIONS**

District Examiner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **APPROVE** |  | **DISAPPROVE** |  |

Supervisory Examiner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **APPROVE** |  | **DISAPPROVE** |  |

Supervision Analyst \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **APPROVE** |  | **DISAPPROVE** |  |

Director of Supervision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **APPROVE** |  | **DISAPPROVE** |  |

Associate Regional Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **APPROVE** |  | **DISAPPROVE** |  |

Regional Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_