

LUCKY SAVERS

Appendix 2: Credit Union Information Sheet

Company Information

This information will be posted on the shared public consumer facing website at www.nycua.org for current and potential credit union members to learn about your program.

Credit union name:

Main office address (city, state, zip):

Website URL:

Core operating system:

Program launch date:

Credit union member-only prize pool: ___ YES or _____ NO

***If Yes, please provide additional information requested below**

Charter number:

Number of members:

Logo: E-mail a JPG or GIF of your credit union's logo to the NYCUA Product Manager

Rules: E-mail a PDF of your credit union's rules to the NYCUA

Counties of operation for your credit union and counties in which you have branch locations:

Administrative Web Access

This information will allow TruLync to set up logins and passwords for persons at your credit union who need access to the administrative website. Persons with access to this site will be able to upload monthly data files and access winner reports and statistical program data. These contacts will also receive program related correspondence. Provide as many names as necessary.

Program Manager Name (Required):

Title (Required):

E-mail Address:

Phone:

Data Manager Name (Required):

Title (Required):

E-mail Address:

Phone:

Credit Union member-only prize pool for 2019-2020

All credit unions participating in the Lucky Savers program are automatically included in the 2016-2017 New York central prize pool. This form is for electing whether a credit union will be offering an additional member-only drawing, funded by the credit union's own separate prize pool.

Please select the following election (INITIAL):

_____ (INITIAL) Our credit union will be participating in the New York state-wide prize pool.

_____ (INITIAL) In addition to the state-wide prize pool, our credit union will also be offering a **member-only drawing as follows:**

MONTHLY: _____ (number)

QUARTERLY: _____ (number)

Please also select the following election (INITIAL):

_____ (INITIAL) Our member-only drawing will start in November for October entries.

_____ (INITIAL) Our member-only drawing will start in _____ for _____ entries.

_____ (INITIAL) Our credit union will also be offering a separate **employee and/or board member-only drawing as follows:**

MONTHLY: _____ (number)

QUARTERLY: _____ (number)

Please also select the following election (INITIAL):

_____ (INITIAL) Our employee/board member-only drawing will start in November for October entries.

_____ (INITIAL) Our employee/board-only drawing will start in _____ for _____ entries