



MID-ILLINI CREDIT UNION

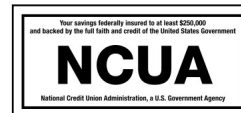
WHERE DIFFERENT | IS BETTER

1811 Eastland DR
P.O. Box 1266
Bloomington, IL 61702

PH 309.661.1166 FAX 309.661.0616

Toll Free 800.527.2205

www.midillnicu.com



Account#: 274030

W

Statement Date: 04/30/2012

Page#: 1

UNIVERSITY BAPTIST FOUNDATION
JULIE ROMANOWSKI/SECRETARY
210 W MULBERRY ST
NORMAL, IL 61761-2530

MICU Membership Drive: May 1 - June 30, 2012
YOU could win a TRIP FOR TWO to COSTA RICA!
Open a qualified new checking account or loan or refer a friend to MICU -
when they open a qualified account, both your names go in the drawing.
Visit www.midillnicu.com for official rules and all the details.

Suffix A - SHARE SAVINGS

TRAN	EFF	DESCRIPTION	AMOUNT	BALANCE	TRAN	EFF	DESCRIPTION	AMOUNT	BALANCE
04/01		PREVIOUS BALANCE		11877.08	04/30		NEW BALANCE		11877.08
				YTD Div:			7.09		

SUMMARY

Description	Count	Debits	Credits	Description	Count	Debits	Credits
Share Draft Items	0	.00	.00	ATM Transactions	0	.00	.00
EFT Transactions	0	.00	.00	Electronic Checks	0	.00	.00
Voice Transactions	0	.00	.00	Other Withdrawals	0	.00	.00
Other Deposits	0		.00				
		Balance Forward:				11877.08	
		Net Change:				.00	
		New Balance:				11877.08	

Suffix X - PLATINUM STRIPE CHCK

TRAN	EFF	DESCRIPTION	AMOUNT	BALANCE	TRAN	EFF	DESCRIPTION	AMOUNT	BALANCE
04/01		PREVIOUS BALANCE		32385.34			042312		
04/09	04/09	WITHDRAWAL R. PHILIP GRIZZA BILL_PAY ID:H0B1FTF6	725.45-	31659.89	04/24	04/24	SHARE DRAFT # 1052 TRACE #: 06518116	40.00-	32017.17
					04/30	04/30	WITHDRAWAL VISA BILL_PAY ID:H0BT7H7F 043012	188.28-	31828.89
04/11	04/11	DEPOSIT AMERICAN BAPTIST Miss Exp ID:09644	1122.73	32782.62	04/30	04/30	WITHDRAWAL PREMIERHEALTHCAR BILL_PAY ID:H0BT73DV 043012	1062.38-	30766.51
04/23	04/23	WITHDRAWAL R. PHILIP GRIZZA BILL_PAY ID:H0BCZKPX	725.45-	32057.17	04/30	04/30	DIVIDEND	3.46	30769.97
					04/30		NEW BALANCE		30769.97

04/30 DIVIDEND Information: TERM: 30 DAYS AVERAGE DAILY BALANCE: 32,411.32 *APYE: .14

ITEM NUMBER RECAP

ITEM #	AMOUNT	ITEM #	AMOUNT	ITEM #	AMOUNT	ITEM #	AMOUNT	ITEM #	AMOUNT
1052	40.00								

TOTAL ITEMS: 1

YTD Div: 11.14

*** CONTINUED ON NEXT PAGE ***



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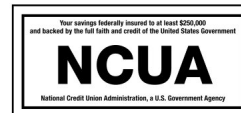
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NORMAL, IL 61761-2530

SUMMARY							
Description	Count	Debits	Credits	Description	Count	Debits	Credits
Share Draft Items	1	40.00-	.00	ATM Transactions	0	.00	.00
EFT Transactions	5	2701.56-	1122.73	Electronic Checks	0	.00	.00
Voice Transactions	0	.00	.00	Other Withdrawals	0	.00	.00
Other Deposits	1		3.46				
		Balance Forward:		32385.34			
		Net Change:		1615.37-			
		New Balance:		30769.97			
		*APYE = ANNUAL PERCENTAGE YIELD EARNED					

YTD TAX INFORMATION

YTD Taxable Dividends:	\$	18.23
YTD Taxable Interest:	\$.00
YTD Finance Charges:	\$.00

If you wish to change your name, address, or contact information contact the credit union using the information on the front of this statement.

Other Than Home-Equity Plans

What To Do If You Think You Find A Mistake On Your Statement

If you think there is an error on your statement, write to us at the address on the front of the first page of this statement. In your letter, give us the following information:

- Account information: Your name and account number.
- Dollar amount: The dollar amount of the suspected error.
- Description of Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors in writing [or electronically]. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

Your Rights If You Are Dissatisfied With Your Credit Card Purchases

If you are dissatisfied with the goods or services that you have purchased with your credit card and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase.

To use this right, all of the following must be true:

1. The purchase must have been made in your home state or within 100 miles of your current mailing address, and the purchase price must have been more than \$50. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or services.)
2. You must have used your credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses your credit card account do not qualify.
3. You must not yet have fully paid for the purchase.

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us in writing [or electronically] at the address on the front of the first page of this statement.

While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay we may report you as delinquent.

Home-Equity Plans BILLING RIGHTS SUMMARY

In Case of Errors or Questions About Your Bill: If you think your bill is wrong, or if you need more information about a transaction on your bill, write us at the address on the front of the first page of this statement, as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

1. Your name and account number.
2. The dollar amount of the suspected error.
3. Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Special Rule for Credit Card Purchases: If you have a problem with the quality of goods or services that you purchased with a credit card, and you have tried in good faith to correct the problem with the merchant, you may not have to pay the remaining amount due on the goods or services. You have this protection only when the purchase price was more than \$50 and the purchase was made in your home state or within 100 miles of your mailing address. (If we own or operate the merchant, or if we mailed you the advertisement for the property or services, all purchases are covered regardless of amount or location of purchase.)

Important Information Regarding the Computation of your Consumer Loan (may also apply to Credit Cards) Balance and Finance Charges: We use the Average Daily Balance Method (including current transactions) to figure a portion of the finance (interest) charge on your account by applying the periodic rate to the "average daily balance" of your account (including current transactions). To calculate each "daily balance" we take the beginning balance of your account each day, add any new purchases/advances/loans, and subtract any payments or credits, and unpaid finance charges. Then, we add up all the daily balances for the billing (statement) cycle and divide the total by the number of days in the billing (statement) cycle. The finance charge is computed when you make a payment. For each day since your last payment, the periodic rate is applied to each "average daily balance". The sum of these charges is the finance charge you currently owe on the loan or credit card account.

Regulation E (Electronic Fund Transfers) SUMMARY OF YOUR RIGHTS

In Case of Errors or Questions About Your Electronic Transfers Call or write us at the phone number listed on the front of the first page of this statement as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the **FIRST** statement on which the error or problem appeared.

- (1) Tell us your name and account number (if any).
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days in MA) to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

You may call the designated phone number on the front of this statement to determine if pre-authorized transfers have occurred.

Certain exempt loans and accounts are not provided with customer protection under Regulation Z and Regulation E. Contact us for specific information, should you have a question pertaining to your accounts.

SHARE DRAFT RECONCILEMENT *** THIS FORM IS PROVIDED TO ASSIST YOU IN BALANCING YOUR DRAFT ACCOUNT

LIST DRAFTS OUTSTANDING NOT CHARGED TO YOUR DRAFT ACCOUNT					
DRAFT NUMBER	AMOUNT		DRAFT NUMBER	AMOUNT	
TOTAL →			\$	-	

PERIOD ENDING		
DAY	MONTH	YEAR
1) <u>SUBTRACT</u> FROM YOUR DRAFT REGISTER ANY CHARGES LISTED ON THIS DRAFT STATEMENT WHICH YOU HAVE NOT PREVIOUSLY DEDUCTED FROM YOUR BALANCE. ALSO, ADD ANY DIVIDENDS.		
2) ENTER DRAFT BALANCE SHOWN ON THIS STATEMENT HERE	\$	
3) ENTER DEPOSITS MADE LATER THAN THE ENDING DATE OF THIS STATEMENT	+	\$
	+	\$
	+	\$
	+	\$
TOTAL (2 PLUS 3)	\$	
4) IN YOUR DRAFT REGISTER, CHECK OFF ALL DRAFTS PAID AND, IN AREA PROVIDED AT LEFT, LIST NUMBERS AND AMOUNTS OF ALL UNPAID DRAFTS	\$	
5) <u>SUBTRACT</u> TOTAL DRAFTS OUTSTANDING	\$	
6) THIS AMOUNT SHOULD EQUAL YOUR DRAFT REGISTER BALANCE	\$	

IF YOU DO NOT BALANCE
 VERIFY ADDITIONS AND SUBTRACTIONS ABOVE AND IN YOUR DRAFT REGISTER. COMPARE THE DOLLAR AMOUNTS OF DRAFTS LISTED ON THIS STATEMENT WITH THE DRAFT AMOUNTS LISTED IN YOUR DRAFT REGISTER. COMPARE THE DOLLAR AMOUNTS OF THE DEPOSITS LISTED ON THIS STATEMENT WITH THE DEPOSIT AMOUNTS RECORDED IN YOUR DRAFT REGISTER.