

## CREDIT LINE ACCOUNT APPLICATION

| <b>=</b>   |   |  |  |                       | ACCC          | OUNT NUMBER                         |                 |                       |
|--|---|--|--|-----------------------|---------------|-------------------------------------|-----------------|-----------------------|
| Applicant Information  1. If You are applying for joint credit with Your Spouse/Co-Aincome as a source of repayment for the credit requested state: (AZ, CA, ID, LA, NM, NV, TX, WA, WI) or Puerto Rissection and the following: | 2. Married applicants can apply for individual credit. Indicate if You would like:  Individual Credit  Joint Credit with Your Spouse/Co-Applicant  3. Method of Payment:  Payroll Deduction Automatic Share Transfer Cash Payment  Definitions:  Whenever used in this application, the words "You" and "Your" refer to the Applicant(s) or |  |  |                       |               |                                     |                 |                       |
| Married Separated Unmarried (Inclu   | Spouse/Co-Applicant and the words "We," "Us," and "Our" refer to the Lender.  |  |  |                       |               |                                     |                 |                       |
| Open-End Credit Applied For:  □ VISA Classic - Limit Desired \$ □ VISA Platinum - Limit Desired \$ □ Personal Line of Credit - Limit Desired \$ □ Personal Overdraft - Limit Desired \$  | Closed-End Credit Applied For:  Type: Amount Requested \$ Length of Repayment Mos  Purpose  Collateral Offered  |  |  |                       |               |                                     |                 |                       |
| If You are applying for a Credit Ca ☐ APPLICANT  | rd, please  |  | □ SPOUSE                                       | or importar<br>□ CO-A | PPLICA        | ANT 🗆                               | ost info        | NER                   |
| FIRST NAME INITIAL LAST NAME   |   | JR./SR.  | FIRST NAME                                     |                       | INITIAL       | LAST NAME                           |                 | JR./SR.               |
| SOCIAL SECURITY NUMBER   | DATE OF BIRTH   | (MM/DD/YY)   | SOCIAL SECURITY NUM                            | MBER                  |               |                                     | DATE OF BIRT    | H (MM/DD/YY)          |
| STREET ADDRESS   | AF  | PT. NO.  | STREET ADDRESS                                 |                       |               |                                     |                 | APT. NO.              |
| CITY STA   | TE ZI   | Р  | CITY   |                       |               |                                     | STATE           | ZIP                   |
| AREA CODE AND HOME TELEPHONE NUMBER CELL PHONE N   | UMBER   |  | AREA CODE AND HOME                             | E TELEPHONE NUME      | BER           | CELL PHONE NU                       | JMBER           |                       |
| E-MAIL ADDRESS   |   |  | E-MAIL ADDRESS                                 |                       |               |                                     |                 |                       |
| RELATIVE OTHER YRS. M  | MO. RENT OR MOF   | RTGAGE PMT.  | RELATIVE                                       | OTHER                 | HOW LONG A    | М                                   |                 | MORTGAGE PMT.         |
| PERSONAL REFERENCES (NOT LIVING WITH YOU) NAME AND TELEPHO   | NE NUMBER   |  | PERSONAL REFERENC                              | ES (NOT LIVING WIT    | TH YOU) NAME  | AND TELEPHON                        | E NUMBER        |                       |
|  |   | orior 2 years Federal inco<br>from alimony, child suppor |  | nce payments unle     | ss You want i | t considered in                     | evaluating this | s credit application. |
| CURRENT JOB TITLE OR OCCUPATION MONTHLY SALARY   |   |  | CURRENT JOB TITLE OR OCCUPATION                |                       |               |                                     | MONTHLY SALARY  |                       |
| STREET ADDRESS   | <u> </u>  |  | STREET ADDRESS                                 |                       |               |                                     |                 |                       |
| СІТУ   | STATE ZI  | Р  | СІТУ   |                       |               |                                     | STATE           | ZIP                   |
| REA CODE AND EMPLOYER'S TELEPHONE NUMBER HOW LONG WITH CURRENT EMP.?  YRS. M   |   | AREA CODE AND EMPLOYER'S TELEPHONE NUMBER                |  |                       |               | HOW LONG WITH CURRENT EMP.?  YRS. M |                 |                       |
| DESCRIPTION OF ANY OTHER INCOME  | MONTHLY AMOU  | NT   | DESCRIPTION OF ANY OTHER INCOME MONTHLY AMOUNT |                       |               |                                     |                 |                       |

| OPTIONAL CREDIT INSURANCE   |  |  |  |   |  |  |  |
|---|--|--|--|---|--|--|--|
| Credit Life and/or Credit Disability Insurance are not rates for Credit Line Accounts are shown below. For Cmonth by the rate shown. For Closed-End loans, the to   | redit Line Accounts, the insurance charge i  | is calculated each month by  | multiplying the outstanding balar  |   |  |  |  |
| Monthly Premium Rates per \$1   | 100 of Outstanding Balance for Credit  | Line Accounts - You mu   | st CHECK ONE OR MORE o   |   |  |  |  |
| CREDIT LIFE:  | Single Coverage - <u>.073</u> Single Coverage - <u>.171</u>  | Yes No   | Joint Coverage112  | ☐ Yes ☐ No  |  |  |  |
| CREDIT DISABILITY:  | Single Coverage - <u>171</u><br>sed-End Loan Applicants - You must   | LI Yes LI No   | Joint Coverage - <u>.256</u>   | ☐ Yes ☐ No  |  |  |  |
| You are interested in Credit Disability Insura  | nce - single coverage 🗖 joint coverage   |  |  | overage D joint coverage D  |  |  |  |
| NOTE: For Closed-End loans, an appropriate disclosure   |  |  |  |   |  |  |  |
| to add the required premiums to Your Account, charge a  | Finance Charge on the premiums at the rate   | which applies to Your Accou  | nt, and forward such premiums to   | tne insurance Company.  |  |  |  |
| SIGNATURE OF APPLICANT  |  | SIGNATURE OF CO-APPLIC   | CANT   | _   |  |  |  |
| SIGNATURES  |  |  |  |   |  |  |  |
| You warrant the truth of the above information and employees and agents to investigate and verify any agree and understand that if approved, You are or that Agreement no later than the time of Your first agree that such liability is joint and several. You a force and effects as Your original signature. You a card, or debit card, You grant and consent to a extent You owe on any unpaid Credit Card balance. | y information provided to Us by You. If the ontractually liable according to the applicated advance and You promise to pay outhorize Us to accept Your facsimile sissume any risk that may be associated lien on Your shares with Us (except II)     | his application is for any Fo<br>icable terms of the Credit I<br>y all amounts charged to y<br>gnatures on this applicatio<br>with permitting Us to acce<br>RA and Keogh accounts) | eature Category contained in C<br>Line Account Agreement and<br>our Account according to its to<br>an and agree that Your facsim<br>pt Your facsimile signature. If<br>and any dividends due or to | Our Credit Line Account Program, You Disclosure. You will receive a copy of erms. If this is a joint application, You ile signature will have the same legal You are issued a Credit Card, ATM become due to You from Us to the |  |  |  |
| You hereby acknowledge Your intent to apply for jo  | int creditApplicant's Initials   | Co-Applicant's Initials  |  |   |  |  |  |
| APPLICANT<br>SIGNATURE  | DATE   | SPOUSE/CO-APPLICAN   | IT/CO-SIGNER   | DATE  |  |  |  |
| Information about costs of the Card<br>number or address shown herein to in<br>Interest Rate and Interest Charges<br>Annual Percentage Rate (APR)<br>For Purchases  | VISA Classic: 12.50  | occurred since the   | visa Platinum: 8.0   |   |  |  |  |
| Annual Percentage Rate (APR) For Balance Transfers  | VISA Classic: 12.50 %  |  | VISA Platinum: 8.0   | %   |  |  |  |
| Annual Percentage Rate (APR) For Cash Advances  | VISA Classic: 12.50 %  |  | VISA Platinum: 8.0   | %   |  |  |  |
| How to Avoid Paying Interest on Purchases   | We will not charge You interest on purchases if You pay Your entire balance owed each month within 25 days of Your statement closing date.   |  |  |   |  |  |  |
| For Credit Card Tips from<br>the Consumer Financial<br>Protection Bureau  | To learn more about factors to consider when applying for or using a Credit Card, visit the website of the Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a> . |  |  |   |  |  |  |
| Fees  |  |  |  |   |  |  |  |
| Transaction Fees  |  |  |  |   |  |  |  |
|   |  |  |  |   |  |  |  |
| <ul> <li>Foreign Transaction</li> </ul>   | n Transaction 1.00% of each foreign transaction in U.S. Dollars.   |  |  |   |  |  |  |
| 0.80% of each U.S. Dollar transaction that occurs in a foreign country.   |  |  |  |   |  |  |  |
| Penalty Fees  |  |  |  |   |  |  |  |
| •   |  |  |  |   |  |  |  |
| <ul> <li>Returned Payment</li> </ul>  | Up to <b>\$25.00</b>   |  |  |   |  |  |  |
| <ul> <li>Late Payment</li> </ul>  | Up to <b>\$25.00</b>   |  |  |   |  |  |  |

**How We Will Calculate Your Balance:** We use a method called "average daily balance (including new purchases)." See Your Account Agreement for details.