

Interest Rates and Interest Charges	Visa® and Visa® Gold
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>11.42%</b> Fixed
<b>APR for Balance Transfers</b>	<b>11.42%</b> Fixed
<b>APR for Cash Advances</b>	<b>11.42%</b> Fixed
<b>Penalty APR and When it Applies</b>	None
<b>How to Avoid Paying Interest</b>	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on retail purchases, cash advances and balance transfers if you pay your entire balance by the due date.
<b>Minimum Interest Charge</b>	None
<b>For Credit Card Tips from the Consumer Financial Protection Bureau</b>	To learn more about factors to consider when applying for or using a credit card, visit the web site of Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a> .
Fees	Visa® and Visa® Gold
<b>Annual Fee</b>	Visa® \$25.00 and Visa® Gold \$50.00
<b>Transactions Fees</b>	
<ul style="list-style-type: none"> <li>Balance Transfer</li> </ul>	None
<ul style="list-style-type: none"> <li>Cash Advances</li> </ul>	None
<ul style="list-style-type: none"> <li>Foreign Transaction</li> </ul>	Up to <b>0.08 – 1.00%</b> of transaction amount
<b>Penalty Fees</b>	
<ul style="list-style-type: none"> <li>Late Payment</li> </ul>	Up to <b>\$25.00</b>
<ul style="list-style-type: none"> <li>Over-the-Credit Limit</li> </ul>	None
<ul style="list-style-type: none"> <li>Returned Payment</li> </ul>	None
<b>Other Fees</b>	
<ul style="list-style-type: none"> <li>Pay by Phone</li> </ul>	<b>\$10.00</b>
<ul style="list-style-type: none"> <li>Customer Requested express mail</li> </ul>	Up to <b>\$50.00</b>

**How We Will Calculate Your Balance:** We use a method called "average daily balance" (including new transactions). \*An explanation of this method is provided in your account agreement.

**Billing Rights:** Information on your rights to dispute transaction and how to exercise those rights is provided in your account agreement.

**Secured Credit Cards** The credit limit assigned to the credit card account will be equal to the amount of our security deposit. Your credit card account cannot be established until your security deposit funds have been collected by the bank. If security deposit funds have not been received within 30 days, the application will be deemed withdrawn and you will have to reapply to be considered for a credit card account. Approved applicants will not be allowed to make transactions using the security deposit funds. The security deposit will be available for withdrawal only after your credit card account has been closed and all amounts owing having been paid in full. By entering into a credit card agreement, you are specifically authoring the Bank to charge against the security deposit funds to pay any sums representing an unpaid balance of the aforesaid credit card account, if not otherwise paid by the undersigned.

# CREDIT APPLICATION

**Check Account Choice:**  
(Signature required for joint applicant)

- Individual Account  
 Joint Account

We intend to apply for joint credit  
Applicant Initials \_\_\_\_\_ Co-Applicant Initials \_\_\_\_\_  
 Credit Line Increase

Credit Limit Request \$ \_\_\_\_\_

Check Card Choice  Visa®  Visa® Gold

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:** To help the government fight the funding of terrorism and money laundering activities. Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to you: When you open an Account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

<b>APPLICANT</b> Note: All applicable sections should be filled out completely to avoid delay in processing your application.	Last Name		First		Middle		Social Security Number	
	Date of Birth	No. of Dependents	Home Phone ( )	Cell Phone ( )		Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Other <input type="checkbox"/>
	Current Address		City		State	Zip Code		How Long (yrs)
	Mailing Address (if different from above)		City		State	Zip Code		How Long (yrs)
	Previous Address (if less than 2 years at present address)		City		State	Zip Code		How Long (yrs)
	Employer			Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone ( )		Date Employed	
	Address				Position/Occupation		Monthly Gross Income \$	
	Name and Address of Previous Employer (if less than 2 years at present employer)							How Long (yrs)
	Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining creditworthiness							Amount per Month \$
	Nearest Relative (Not Living With You)				Home Phone ( )		Relationship	
<b>CO-APPLICANT</b> Intended for joint applicant, this information is not required for an individual account.	Last Name		First		Middle		Social Security Number	
	Date of Birth	No. of Dependents	Home Phone ( )	Cell Phone ( )		Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Other <input type="checkbox"/>
	Current Address		City		State	Zip Code		How Long (yrs)
	Previous Address (if less than 2 years at present address)		City		State	Zip Code		How Long (yrs)
	Employer			Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone ( )		Date Employed	
	Address				Position/Occupation		Monthly Gross Income \$	
<b>CREDIT INFO</b> Attach Additional Sheets if Necessary	Name and Address of Creditor		Name under Which Account is Carried		Account Number	Balance	Monthly Payment	
	1. Home Mortgage/Rent							
2. Bank Credit Card/Bank Name and Address								
<b>SIGNATURES</b>	<b>PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:</b> This statement is submitted to obtain credit and I/We certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.							
	X _____ Applicant Signature Date				X _____ Co-Applicant Signature Date			
<b>TRANSFER OF BAL REQUEST</b>	Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account.							
	<input type="checkbox"/> Credit Card Account Number _____		Amount to be transferred \$ _____					
Signature _____								
<b>FOR INTERNAL USE ONLY</b>	Visa Account No.							
	Date Approved			Credit Line			Approved By	