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IN THE
UNITED STATES



BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY ADDRESSEE

DEMOTTE STATE BANK

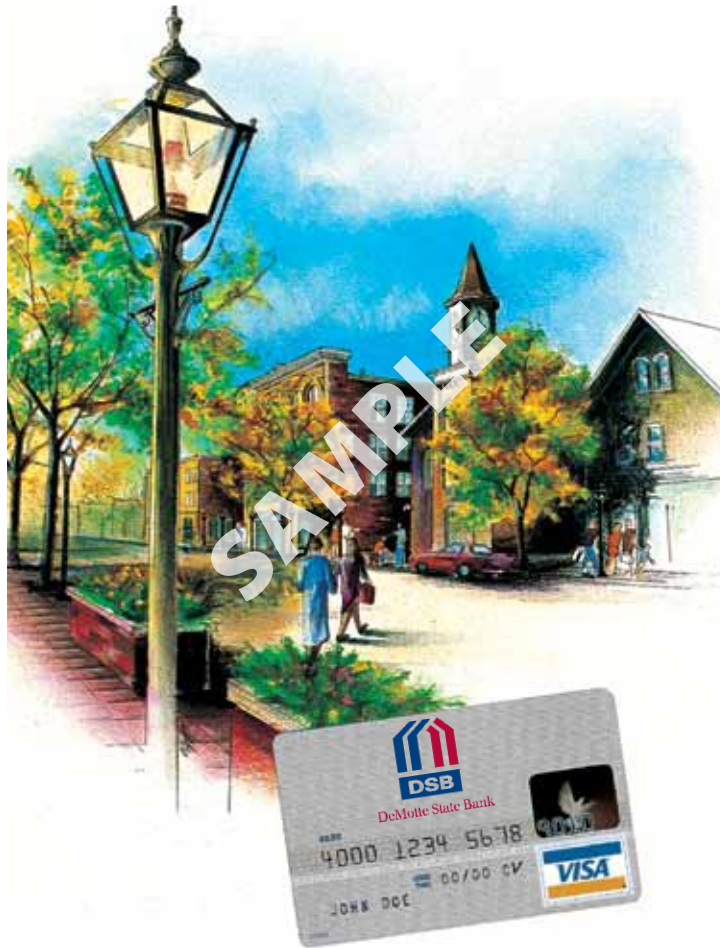
210 S. HALLECK

PO BOX 400

DEMOTTE, IN 46310-9900



THE HOMETOWN CARD...



...WITH WORLDWIDE ACCEPTANCE

APPLY TODAY



DeMotte State Bank

Building a successful financial plan takes the right resources. That's why we work hard to provide you with quality financial services and products. Like our convenient, flexible Visa® Gold & Visa® Business Credit Cards. It's accepted at thousands of locations worldwide for just about any type of purchase you can dream up. And, unlike those big out-of-town institutions, our card comes with the personal, friendly service you've come to expect from us. So, whatever your plans, choose the credit card that gives you all the value and buying power you need to get your projects off the drawing board.

Apply for yours today!



DeMotte State Bank



When you use the...



DeMotte State Bank

Visa® Gold Credit Card for the purchase of goods or services, the following benefits are yours!

EXTENDED WARRANTY

On purchases made in full using our credit card, the extended warranty program doubles the U.S. manufacturer's warranty period and extends the coverage up to one additional year for warranties of one to five years (some exclusions apply.)

CARDCENTIVES - PRIME

- \$1,000 Identity Theft Insurance
- Identity Theft Victim Assistance
- Payment Card Registration
- Travel Reservation Service
- 90-Days Product Protection

With Visa® Business

SCORECARD® BONUS POINTS

Earn Bonus Points for every net retail purchase you make with our DeMotte State Bank Credit Card! You can redeem Bonus Points for brand-name merchandise and exciting travel awards. Visit www.scorecardrewards.com and browse the current award selections. You'll be amazed at what ScoreCard® has to offer! To find out how the plan works, ask one of our friendly representatives.

Interest Rates and Interest Charges	Visa® Gold	Visa® Business
Annual Percentage Rate (APR) for Purchases	9.25% Variable	9.25% Variable
APR for Balance Transfers	9.25% Variable	9.25% Variable
APR for Cash Advances	9.25% Variable	9.25% Variable
Penalty APR and When it Applies	None	
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date (Grace Period) each month.	
Minimum Interest Charge	If you are charged interest, the charge will be no less than \$0.00	
For Credit Card Tips from the Federal Reserve Board	To learn more about factors to consider when applying for or using a credit card, visit the web site of the Federal Reserve Board at http://www.federalreserve.gov/creditcard .	
Fees	Visa® Gold	Visa® Business
Annual Fee	None	None
Transaction Fees	None	
• Balance Transfer	None	
• Cash Advances	None	
• Foreign Transaction	1.0% of each transaction in U.S. dollars.	
Penalty Fees	If the minimum required payment is not received within 10 days after the closing date subsequent to the payment due date, a late payment fee of \$0.00 to \$500.00 - \$10.00, \$500.01 to \$2500.00 - \$13.25, \$2,500.00 and over - \$16.50 will be imposed.	
• Late Payment	None	
• Over-the-Credit-Limit	None	
• Returned Payment	None	
Other Fees	None	

*The rate used to determine your APR is the prime rate published in the Wall Street Journal 30 Days preceding the beginning of each quarter plus 6%
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 transactions and how to exercise those rights is provided in your account agreement.

CREDIT APPLICATION

Check Card Choice:

- Visa® Gold
 Visa® Business
 (Minimum Credit Limit \$5,000.00)

Check Account Choice: (Only One)

- Individual Account
 Joint Account (see co-applicant and signatures section)
 Credit Line Increase

MINIMUM ANNUAL INCOME REQUIRED \$35,000.00 OR \$15,000.00 ON DEPOSIT WITH DeMOTTE STATE BANK

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.

APPLICANT <small>Note: All applicable sections should be filled out completely to avoid delay in processing your application.</small>	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"/>	Monthly Payment \$
	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 \$	
CO-APPLICANT <small>Intended for joint applicant, unless informed otherwise for an individual account.</small>	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	
	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"/>	Monthly Payment \$
	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)
CREDIT INFO <small>Attach Additional Sheets if Necessary</small>	Bank Name and Address		Branch		Loans <input type="checkbox"/> Open <input type="checkbox"/> Closed	
	Checking Account Number Name Listed		Savings Account Number Name Listed			
	Name and Address of Creditor	Name under Which Account is Carried	Account Number	Balance	Monthly Payment	
1. Automobile				\$	\$	
2. Home Mortgage/Rent				\$	\$	
3. Bank Credit Card/Bank Name and Address				\$	\$	
COND. FINANCIAL STATEMENT	ASSETS	Total Real Estate (Including home) \$	IMPORTANT: THE FINANCIAL STATEMENT MUST BE COMPLETED BEFORE YOUR APPLICATION CAN BE PROCESSED.		Total of All Other Debts \$	
	Total Cash and Bank Assets (including CDs)	All Other Property (including autos, boats) \$			TOTAL LIABILITIES \$	
	Total Stocks, Bonds and Notes \$	TOTAL ASSETS \$	Total of Mortgages on Real Estate \$	NET WORTH (Total Assets Less Liabilities) \$		
SIGNATURES	PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: 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
TRANSFER OF BAL REQUEST	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 \$ _____			
FOR INTERNAL USE ONLY	Signature _____					
	Date Approved		Credit Line		Approved By	