Interest Rates and Interest Charges	Visa® Gold and Visa® Business
Annual Percentage Rate (APR) for Purchase:	10.25% (Variable-Rate subject to change)  *Titis APRwill varywith the market based on the Prime Rate (Accurate as of 10/17)
APR for Balance Transfers	10.25% (Variable-Rate subject to change) *This APR will vary with the market based on the Prime Rate (Accurate as of 10/17)
APR for Cash Advances	10.25% (Variable-Rate subject to change)  This APR will vary with the market based on the Prime Rate (Accurate as of 10/17)
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 each month. We will begin charging interest on Cash Advances and Balance Transfers on the transaction date.
For Credit Card Tips from the Consumer Financial 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 http://www.consumerfinance.gov/learnmore
Fees	Visa® Gold and Visa® Business
Annual Fee	None
Transaction Fees	
Balance Transfer	None
Cash Advances	None
Foreign Transaction	Up to 1.0% of each transaction in U.S. dollars.
Penalty Fees	
• Late Payment	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 up to \$18.50 will be imposed. This late charge is subject to change as provided in Indiana Code section 24-4.5-1-106.
Over-the-Credit-Limit	None
Returned Payment	None
Other Fees	
Automated Payments	No Fee
• Pay by Phone	No Fee

<sup>\*</sup>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)	Check Account Choice: (Only One) ☐ Individual Account ☐ Joint Account (See co-applicant and signatures section) ☐ Credit Line Increase
MPORTANTINFORMATION ABOUT PR	OCEDURES 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

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 willask 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.

_	Last Name		First			Middle				Social Security Number		
APPLICANT Note: All applicable sections should be filted out completely to avoid delay in processing your application.	Date of Birth	No. of Depend	ents	Home Phone Cell Phone			Own	Rent	Other	Monthly Payment \$		
	Current Address	rrent Address C		City	City		State	Zip Code			How Long (yrs)	
	Mailing Address (if different from above) City			City	18		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 W. ☐ Yes ☐ No (				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)			
te: All a	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 \$		
Š	Nearest Relative (Not Living With You)					Home Phone				Relationship		
s s	Last Name			First			Middle				Social Security Number	
ANT Sant, thi ed for a	Date of Birth	No. of Depend	ents	Home Phone		Cell Phone		Own	Rent	Other	Monthly Payment \$	
accouring accouring	Current Address	ddress			City		State	Zip Code			How Long (yrs)	
PP for join vidual	Previous Address (if less than 2 years	s at present addr	ress)	City			State	Zip Code			How Long (yrs)	
CO-APPLICANT Intended for joint applicant, this information is not required for an individual account.	Employer Self Emp				Self Employed  Yes No		Work Phone				Date Employed	
	Address					Position/Occupation				Monthly Gross Income \$		
CREDIT INFO Attach Additional Sheets If Necessary	Bank Name and Address					Branch					Loans  Open Closed	
	Checking Account Number Name Listed					Savings Account Number Name Listed						
→ ddifion	Name and Address of Creditor				hich Account is Carried Account Numb						Monthly Payment	
ach A	1. Automobile							\$			\$	
She	Home Mortgage/Rent							\$			\$	
	3. Bank Credit Card/Bank Name and	Address			- 41			\$			\$	
COND. FINANCIAL STMNT	ASSETS	Total Real Esta (Including hom			MUST BE CON	MPORTANT: THE FINANCIAL STATEMENT MUST BE COMPLETED BEFORE YOUR Total of All Other Debts \$				\$		
COND. NANCIA STMNT	Total Cash and Bank Assets (including CDs)	All Other Prop			APPLICATION LIABILITIES	PLICATION CAN BE PROCESSED.			TOTAL LIABILITIES \$			
Ω¥Ω	Total Stocks, Bonds and Notes \$				Total of Mortgages on Real Estate \$			NET WOF	NET WORTH (Total Assets Less Liabilities) \$			
SIGNATURES	PLEASE READ THE FOLLOWING inquiries may be made to verify infor agree to be bound by the terms and of such terms to be conclusively pre time. We may report information abo  X  Applicant Signature	CADECILIVE	EEODE CICHING	G: This statement s or verification made eement, a copy of f you intend to apple eaus. Late payment	is submitted to ob ay be given based of which will be may ply for joint credit, ents, missed payr	btain credit and I/d on inquiries from ailed to the appliate the undersigned ments, or other de-Applicant Signat	n other parties. T cant if this applic d shall be jointly a efaults on your a	Information b	orein in	to so and a	complete. I/We agree that policies of this institution. I/We hagreement and acceptance all credit extended from time to credit report.	
DESCRIPTION OF THE PERSON NAMED IN	Upon approval, I wish to transfer my	present balance	on the credit card	AND DESCRIPTION OF STREET							Date	
SFE	□ Credit Card Account Number Amount to be transferred \$											
TRANSFER OF BAL REQUEST	Signature Signature											
		VIII STATE OF THE		THE RESERVE TO SERVE THE PARTY OF THE PARTY			Carlo Ca	-				
	Visa Account No.											
FOR INTERNAL USE ONLY				Credit Line				Approved	Ву			

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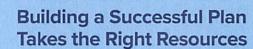
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**DeMotte State Bank** 





flexible Visa Gold & Visa Business Credit Cards. It's

## Apply for your card today!







### The Visa® Gold Credit Card Gives You the Following Benefits

#### **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**

- \$1000 Identity Theft Insurance
- Identity Theft Victim Assistance
- Payment Card Registration
- Travel Reservation Service
- 90-Days Product Protection

#### ScoreCard® Bonus Points With Visa Business

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 rewards. 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.

