IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

Officer #

The problem of the funding Act Disclosure Information, please call (877) 331-2119.

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, physical 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. Return Completed Applications to: BankCard Services, P.O. Box 779, Jefferson City, MO 65102; Fax (573) 634-1104

Interest Rates and												
Annual Percentage Rate (APR) for Purchases				0.00% introductory APR for six (6) statement cycles after account opening. After that,								
				your APR will be <b>16.49%</b> to <b>26.24%</b> , based on your								
				creditworthiness. This APR will vary with the market based on the Prime Rate.								
APR for Balance Transfers				16.49% to 26.24%								
APR for Balance Transfers				Your APR will be based on your creditworthiness. This APR will vary with the market								
				based on the Prime Rate.								
APR for Cash Advances				29.24%								
				This APR will vary with the market based on the Prime Rate.								
Paying Interest				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.								
Minimum Interest Charge				If you are charged interest, the charge will be no less than \$1.50								
For Credit Card Tips from the Consumer				To learn more about factors to consider when applying for or using a credit card, visit								
Financial Protection Bureau				the website of the Consumer Financial Protection Bureau at								
				www.consumerfinance.gov/learnmore								
Fees Annual Fee				Maria								
Transaction Fees				None								
Balance Transfer				Either <b>\$10</b> or <b>4%</b> of the amount of each transfer, whichever is greater								
Cash Advance				Either \$10 or 4% of the amount of each transfer, whichever is greater								
International Transaction				3% of each transaction once converted into U.S. Dollars								
Penalty Fees												
Late Payment				Up to \$35								
Over-the-Credit Limit				None								
Returned Payment				Up to \$35								
The information about the costs of the card described in this is accurate as of (07/2025). This information may have changed after that date. To find out what may have changed, call us at (800) 445-9272 or wr us at BankCard Services, P.O. Box 779, Jefferson City, MO 65102.  How We will Calculate Your Balance: We use a method called "average daily balance (excluding new purchases)."										ed, call us at (600) 445-9272 of write		
Loss of Introductory APR: W	e may end your ir	ntroductory APR and	d apply th	ne Annual Percenta	ge Rate for Purchases if							
If you would like to ac Primary Applicant li		ized User, pie	ase pr	ovide Authori	zed User Informa	tion	ın the se	ction be	elow.			
First Name				1			Birth Date Soc			Social Securit	ocial Security Number	
Physical Address, City, State & Zip					City	ity, State & Zip (if different than physical)						
Home Phone Cell Phone Pref		Prefe	erred Email Address			Residential Status ☐Own ☐Rent ☐C			ther	Monthly Payment \$		
☐ Drivers License #		☐Passport#					State	_	sue l		Expiration Date	
Foundation divis					I Maria Diama				-	One a Mandal		
Employed by		Position			Work Phone					Gross Monthly	y income"	
*Income means wages, salar Interest dividends and retirem												
repayment. If you are under 2	21, you may consid	ler the amount of ar	nother pe	erson's income that	is regularly deposited into	you	r account.	, , , , , , , , , , , , , , , , , , , ,				
Authorized User Information  First Name Initial Last						Birth Date			Social Security Number			
										,		
Physical Address, City, State & Zip					ty, State & Zip (if different than physical)							
Home Phone Cell Phone Pref			ferred Email Address									
□ Drivers License # □ Passport #						State	Is	sue l	Date	Expiration Date		
											rs of age. I authorize the issuing Bank	
accept that on a periodic basis	, the account may b	e considered to an au	utomatic ι	upgrade at the discre	tion of the issuing Bank. I u	nders	stand that the a	acceptance (	of use	of any card issued will	ers its credit experience with me. I be subject to the terms of this	
	Primary Applicant Signature					y future amendments thereto. Bank reserves the right to retain this application whether or not is it approved.  Date						