

SOURCES OF INCOME

Important Notice to Individuals

ALIMONY-CHILD SUPPORT: The inclusion of alimony, separate maintenance, or child support as income is voluntary and need not be revealed if you do not wish to have it considered in evaluating this application.

| GROSS ANNUAL INCOME | APPLICANT | GUARANTOR OR CO-APPLICANT #1 | GUARANTOR OR CO-APPLICANT #2 | TOTAL | SPOUSE (IF APPLICABLE) |
|----------------------------|-----------|------------------------------|------------------------------|-------|------------------------|
| NET SALES | | | | | |
| BASE SALARY | | | | | |
| OVERTIME | | | | | |
| BONUS AND/OR COMMISSIONS | | | | | |
| DIVIDENDS/INTEREST | | | | | |
| NET RENTAL INCOME | | | | | |
| ITEMIZED OTHER: | | | | | |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| TOTAL ANNUAL INCOME | | | | | |

FINANCIAL INFORMATION

Please include copies of the following checked items as attachments to this application:

- Federal Tax Return For:**
- | | | | | |
|---------------------------------------|--|--|-----------------------------------|--|
| <input type="checkbox"/> Current Year | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Balance Sheet for Current Year for: | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) |
| <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) | <input type="checkbox"/> Income Statement for Current Year: | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) |
| | | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) |

Financial Services Accounts Information:

- | | | | | | | | |
|-----------------------------------|-----------------------------------|--|----------------------|---------------------------------------|-----------------------------------|--|----------------------|
| <input type="checkbox"/> Checking | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) | ____ Number Attached | <input type="checkbox"/> Loan(s) | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) | ____ Number Attached |
| <input type="checkbox"/> Savings | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) | ____ Number Attached | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Borrower | <input type="checkbox"/> Guarantor/Co-Applicant(s) | ____ Number Attached |

Check if additional account information accompanies this application.

STATE LAW NOTICES

OHIO RESIDENTS ONLY: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

WISCONSIN RESIDENTS ONLY: Please sign if you are **not** applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

SIGNATURE FOR WISCONSIN RESIDENTS ONLY _____ DATE _____

SIGNATURES

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report to make its decision. You agree that requested documentation that accompanies this application is complete and correct and that it's incorporated as part of this application. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a crime to willfully and deliberately provide incomplete or incorrect information in this application.

The person(s) signing the application is/are indeed authorized to act on behalf of the borrower. Borrower, co-applicant(s), and guarantor(s), as appropriate grants to the credit union the authority to use reasonable means to verify application information by requesting credit bureau reports, accessing information about borrower, co-applicant(s), and guarantor(s), as appropriate from other third party information providers, and other means if applicable. Borrower further grants to credit union the right to share this information with third parties as reasonable in the normal course of doing commercial lending including sharing this information with a third party for purposes of underwriting the loan. Borrower agrees to pay any fees charged by the credit union for processing this application and other related expenses whether the application is approved or denied. You promise that the credit you are applying for is for a business purpose. By signing below or by using your card, you understand that either of those actions will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures.

By: _____
 BORROWER CO-APPLICANT GUARANTOR DATE _____
 TITLE: _____

By: _____
 BORROWER CO-APPLICANT GUARANTOR DATE _____
 TITLE: _____

By: _____
 BORROWER CO-APPLICANT GUARANTOR DATE _____
 TITLE: _____

By: _____
 BORROWER CO-APPLICANT GUARANTOR DATE _____
 TITLE: _____

FOR CREDIT UNION USE ONLY

VERIFICATION COMPLETION DATE _____ BY _____

GOVERNMENT LIST(S) CHECKED: TREASURY CIP LIST OFAC OTHER:

LIST VERIFICATION COMPLETION DATE _____ BY _____

| DATE | APPROVED DENIED (Adverse Action Notice Sent) | APPROVED LIMITS: | SIGNATURE | LINE OF CREDIT | CREDIT CARD | OTHER | OTHER |
|------|--|------------------|-----------|----------------|-------------|-------|-------|
| | | | \$ | \$ | \$ | \$ | \$ |

LOAN OFFICER COMMENTS:

SIGNATURES:

_____ DATE _____ _____ DATE _____