

<b>Interest Rates and Interest Charges</b>	Visa® and MasterCard®
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>16.90%</b> Fixed
<b>APR for Cash Advances</b>	<b>19.90%</b> Fixed
<b>Penalty APR and When it Applies</b>	None
<b>Paying Interest</b>	Your due date is at least <b>35</b> days after the close of each billing cycle. We will not charge you interest on retail purchases and/or cash advances if you pay your entire balance by the due date. We do not offer balance transfers.
<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 the Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a> .
<b>Fees</b>	Visa® and MasterCard®
<b>Annual Fee</b>	None
<b>Transaction Fees</b>	
• Cash Advances	Up to <b>\$5.00</b> or <b>1.0%</b> of the amount advanced.
• Foreign Transaction	Up to <b>1.0%</b>
<b>Penalty Fees</b>	
• Late Payment	Up to <b>\$30.00</b>
• Over-the-Credit Limit	Up to <b>\$10.00</b>
• Returned Payment	None
<b>Other Fees</b>	None

**How We Will Calculate Your Balance:** We use a method called "average daily balance" (including new purchases). \* 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 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 Requested \$ \_\_\_\_\_

Check Card Choice  Visa®  MasterCard®

**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> <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 \$
	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> <small>Intended for joint applicant, this information is required for an individual account.</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)
	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> <small>Attach Additional Sheets if Necessary</small>	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
<b>FOR INTERNAL USE ONLY</b>	Date Approved			Credit Line	Approved By	
	Date Approved			Credit Line	Approved By	



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Bank of Cave City  
PO Box 490  
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- Medical Assistance Services
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  - Lost Luggage Locator Service
  - Lost or Damaged Luggage Insurance
  - Hotel-Motel Burglary Insurance
- Payment Card Registration
- Quarterly Newsletter
- Key Registration