



BUSINESS CREDIT CARD ADDENDUM

This addendum is incorporated into and becomes part of your LOANLINER® Business Credit Card Agreement. Please keep this attached to your LOANLINER® Business Credit Card Agreement.

CREDIT CARD NAME:

CREDIT LIMIT: \$

INTEREST RATE

Purchases: Variable Rate*	13.00 % This interest rate will vary with the Prime Rate..
Balance Transfers: Variable Rate*	13.00 % This interest rate will vary with the Prime Rate.
Cash Advances: Variable Rate*	13.00 % This interest rate will vary with the Prime Rate.
Penalty: Fixed Rate	23.00%

VARIABLE RATE*

Name of Index:	Prime Rate
Date the Index is Determined:	First day of each month
Effective Date of Index:	1 st day of billing cycle monthly
Current Index Value:	4 %

Margins (Amount of percentage points by which Index will be increased to determine the Interest Rate):

Purchases:	6 percentage points
Balance Transfers	6 percentage points
Cash Advances:	6 percentage points

Your Interest Rate is variable and may change automatically from time to time according to the variable rate terms set forth in this Addendum. The Interest Rate is subject to change on the 1st day of the billing monthly to reflect any change in the Index and will be determined by the Prime Rate as published in *The Wall Street Journal* "Money Rates" table to which we add a margin. Your Interest Rate will never be less than 6% or greater than 24.99%. Any increase in the Interest Rate will take the form of additional payments shown as Total Minimum Payments on the statement. If the Index is no longer available, the Credit Union will choose a new index which is based upon comparable information.

Fees

Transaction Fees	
- Cash Advance	3.00% of the amount of each cash advance or \$5.00, whichever is greater.
- Foreign Transaction	0.80% of each transaction in U.S. dollars completed outside the U.S. 0.20% of each transaction in U.S. dollars completed in a foreign currency.

Penalty Fees	
- Late Payment	Up to \$35.00
- Returned Payment	Up to \$35.00
Other Fees	
- Rush	\$20.00
- Chip Card Replacement Fee	\$5.00

Method for Computing the Balance for Purchases: Average Daily Balance Including New Purchases.

Balance Transfers: We may permit you to transfer the balance of an account that you owe to another creditor to your account with us. If we approve a balance transfer, finance charges will be calculated and will accrue according to the same method as cash advances .

Minimum Payment: Your monthly payment will be 2.00% of your total new balance, or \$10.00, whichever is greater plus outstanding unpaid fees and charges, all prior unpaid payments and any amount that exceeds your credit limit.

Business - Application

IMPORTANT INFORMATION ABOUT PROCEDURES FOR APPLYING FOR A LOAN

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 or business that opens an account.
 What this means for you: When you open an account, we will ask for your name, address, date of birth, if applicable, and other information that will allow us to identify you.

We may also ask to see your driver's license or other identifying documents.

Married Applicants may apply for a separate account.

LOAN REQUEST

Member/Account Number:

Application Type: New Renewal/Change Other: _____

Type of Credit:

Individual/Business Joint (Co-Applicant must individually complete Co-Applicant Information)

Amount requested: \$

Terms/Maturity:

Type: Line of Credit Term Loan Credit Card

Commercial Real Estate Other: _____

Purpose of Loan:

LOAN SECURITY

Collateral Description:

Value: _____ Liens/Security Interest and State Filed: _____

Subject Property Address (street, city, state, and zip): _____

APPLICANT/INDIVIDUAL INFORMATION

BUSINESS/INDIVIDUAL NAME	YEAR BUSINESS ESTABLISHED	STATE
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DBA NAME(S) _____

PRIOR BUSINESS NAME(S) _____

CONTACT NAME	TITLE	TELEPHONE
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TYPE OF ORGANIZATION:

INDIVIDUAL PROPRIETORSHIP PARTNERSHIP CORPORATION LLC ASSOCIATION NON-PROFIT OTHER: _____

IF INDIVIDUAL, PROVIDE THE FOLLOWING INFORMATION:

EMPLOYER NAME:	EMPLOYER TELEPHONE NUMBER
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SSN/TIN NUMBER	DRIVER'S LICENSE NUMBER/STATE	ISSUANCE DATE	EXPIRATION DATE	DATE OF BIRTH
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HOME TELEPHONE	WORK TELEPHONE	CELL PHONE	FAX NUMBER	WEB SITE ADDRESS/EMAIL
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PHYSICAL ADDRESS _____

MAILING ADDRESS _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:	ID VERIFICATION:
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MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

GUARANTOR/CO-APPLICANT

1. I AM PROVIDING THE FOLLOWING INFORMATION FOR PURPOSES OF SERVING AS A (CHECK ONE):	SSN/TIN NUMBER	DATE OF BIRTH
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GUARANTOR CO-APPLICANT

NAME	DRIVER'S LICENSE NUMBER/STATE	ISSUANCE DATE	EXPIRATION DATE
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HOME TELEPHONE	WORK TELEPHONE	CELL PHONE	FAX NUMBER	WEB SITE ADDRESS/EMAIL
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PHYSICAL ADDRESS _____

MAILING ADDRESS _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:	ID VERIFICATION:
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MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

2. I AM PROVIDING THE FOLLOWING INFORMATION FOR PURPOSES OF SERVING AS A (CHECK ONE):	SSN/TIN NUMBER	DATE OF BIRTH
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GUARANTOR CO-APPLICANT

NAME	DRIVER'S LICENSE NUMBER/STATE	ISSUANCE DATE	EXPIRATION DATE
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HOME TELEPHONE	WORK TELEPHONE	CELL PHONE	FAX NUMBER	WEB SITE ADDRESS/EMAIL
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PHYSICAL ADDRESS _____

MAILING ADDRESS _____

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:	ID VERIFICATION:
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MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

or CHECK IF ADDITIONAL GUARANTOR/CO-APPLICANT INFORMATION ACCOMPANIES THIS APPLICATION.

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:

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

Financial Services Accounts Information:

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