Interest Rates and Interest Charges	Visa [®] and Visa [®] Gold					
Annual Percentage Rate (APR) for Purchases	7.99% to 19.99% when you open your account, based on your creditworthiness. After that, your APR will vary with the market based on the Prime Rate*					
APR for Balance Transfers	11.00% This APR will vary with the market based on the Prime Rate*					
APR for Cash Advances	11.00% This APR will vary with the market based on the Prime Rate*					
Penalty APR and When it Applies	None					
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 retail purchases and balance transfers if you pay your entire balance by the due date each month.					
Minimum Interest Charge	If you are charged interest, the charge will be no less than \$0.00 .					
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 web site of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore					
Fees	Visa [®] and Visa [®] Gold					
Annual Fee	None					
Transaction Fees	×*					
Balance Transfer	None					
Cash Advances	Up to \$50.00 or 2.0% of the amount advanced. Never less than \$3.00					
Foreign Transaction	Up to 1.0%					
Penalty Fees						
Late Payment	Up to \$25.00					
Over-the-Credit Limit	None					
Returned Payment	None					
Other Fees	-					
Temporary Credit Increase	\$5.00					
Replacement Card Fee	\$10.00					

The prime rate used to determine your APR is the rate published in the Wall Street Journal. 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. Military Lending Act: Federal law provides important protections to members of the armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must include, as applicable to the credit transaction or account: The costs associated with credit insurance premiums; fees for ancillary products sold in connection with the credit transaction; any application fee charged (other than certain fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation fees for a credit card account).

CREDIT APPLICATION

Check Account Choice: (Signature required for joint applicant)

Individual Account Joint Account
Joint Account
We intend to apply for joint credit
Applicant Initials _____ Co-4
Credit Line Increase

Credit Limit Requested \$ _

Co-Applicant Initials

Check Card Choice 🖸 Visa® 🕞 Visa® Gold											
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.											
APPLICANT Note: All applicable sections should be filled out completely to avoid delay in processing your application.	Last Name			First			Middle			Social Security Number	
	Date of Birth	Email Address		Home Phone ()		Cell Phone ()		Own Rent	Other	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			Work Phone ()			Date Employed	
	Address	Po			Position/Occupati	on	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 Liv				Home Phone ()			Relationship			
CO-APPLICANT Intended for joint applicant, this information is not required for an individual account.	Last Name			First			Middle		Social Security Number		
	Date of Birth	Email Address		Home Phone ()		Cell Phone ()	10	Own Rent	Other	Monthly Payment \$	
	Current Address	City			State	Zip Code		How Long (yrs)			
	Previous Address (if less	City			State Zip Code			How Long (yrs)			
	Employer	Self Employed I Yes I No			Work Phone ()			Date Employed			
	Address				2	Position/Occupation			Monthly Gross Income \$		
O E	Name and Address of Cre	editor	Name under Which A	Account is Carrie	ed	Account Numb	per	Balance		Monthly Payment	
Additional Additional	1. Home Mortgage/Rent	ome Mortgage/Rent								-	
CREDIT INFO Attach Additional Sheets If Necessary	2. Bank Credit Card/Bank	. Bank Credit Card/Bank Name and Address									
SIGNATURES	PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: 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										
КГ	Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account.										
TRANSFER OF BAL REQUEST	Credit Card Account Number Amount to be transferred \$										
No N	Signature										
אך	Visa Account No.										
ĸŽŽ											
FOR INTERNAL USE ONLY	Date Approved Credit Line						3	Approved By			
	Stillman BancCorp NA, Stillman Valley, IL 61084 FOLD AND SECURE WITH TAPE FOR MAILING Application ©2009 FIS* 08/22										

Application ©2009 FIS[®] 08/22

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