

DECLARATIONS					
<i>(If a 'Yes' answer is given to a question, explain on an attached sheet)</i>					
	APPLICANT		OTHER		
Do you have any outstanding judgments?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
Have you ever filed for bankruptcy or had a debt adjustment plan confirmed under Chapter 13?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
Have you ever had property foreclosed upon or repossessed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
Are you a party in a lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
Are you other than a U.S. Citizen or permanent resident alien?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
Are any of your debts past due?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
Are you a co-maker, co-signer or guarantor on any loan not listed above? <i>(complete below)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> No
If so, for whom? (Name/Relationship)					
If so, for whom? (Name/Relationship)					

CREDIT CARD ACCOUNT CHARACTERISTICS					
ANNUAL PERCENTAGE RATE FOR PURCHASES	GRACE PERIOD FOR REPAYMENT OF BALANCES FROM PURCHASES	METHOD OF COMPUTING THE BALANCES FROM PURCHASES	ANNUAL PERCENTAGE RATE FOR CASH ADVANCES AND BALANCE TRANSFERS	LATE PAYMENT FEE	OVER THE CREDIT LIMIT FEE
*9.9-18.0%	25 Days	Average daily balance (including new purchases)	*9.9-18.0%	\$10.00 for payment made 10 days or more after due date.	\$10.00 per month (billing cycle) for balances exceeding approved credit limit by 10% or more during a month (billing cycle).
* Actual rate subject to credit evaluation. The information about the costs of the card described in this application is accurate as of June 2004. Call or write us to obtain current information					

SECURITY INTEREST			
<p>To secure your credit card account, you grant us a purchase money security interest under the Uniform Commercial Code in any goods you purchase through use of the VISA card. If you default, we will have the right to recover any of these goods which have not been paid for through our application of your payments. You pledge all savings and/or deposits (including amounts in checking accounts) and payments and earnings thereon which you now or hereafter may have with us, whether held jointly, individually or in trust, as security for any and all monies, advances, or purchases made by use of the VISA card and any interest accrued thereon. Upon default you authorize us to take what you owe us out of any such account (except Individual Retirement Accounts) you have with us. You also grant us a security interest in all collateral you have offered as security for past loans and for all loans in the future with Secure First Credit Union.</p>			
X	<input type="text"/>	<input type="text"/>	Date
Applicant Signature			
X	<input type="text"/>	<input type="text"/>	Date
Other Signature			

AUTHORIZED USER(S)			
The following person(s) is (are) authorized to use this VISA account. Applicant(s) and authorized user(s) acknowledge that all parties are subject to the terms of the VISA Credit Card Agreement.			
Full Name:	<input type="text"/>	Full Name:	<input type="text"/>
Social Security Number:	<input type="text"/>	Social Security Number :	<input type="text"/>
Date of Birth:	<input type="text"/>	Date of Birth:	<input type="text"/>
X	<input type="text"/>	<input type="text"/>	Date
Authorized User Signature			
X	<input type="text"/>	<input type="text"/>	Date
Other Signature			

SIGNATURE(S)			
<p>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 union references or verification may be given based on inquiries from other parties as authorized by law. This offer is subject to the credit policies of Sloss Federal Credit Union. I/We agree to be bound by the terms and conditions of the installment loan, open-end loan, or credit card 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 this application is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. I/We understand that it is a federal crime to willfully and deliberately provide incomplete or incorrect information on credit applications made to credit unions insured by the National Credit Union Administration.</p>			
X	<input type="text"/>	<input type="text"/>	Date
Applicant Signature			
X	<input type="text"/>	<input type="text"/>	Date
Other Signature			

<u>For Credit Union Use Only</u>			
<input type="checkbox"/> Approved			
<input type="checkbox"/> Denied	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>
<input type="checkbox"/> Countered	Approved Collateralized	Approved (open-end) Limit	Approved Signature
Comment/Denial Reason/Counter Condition: <input type="text"/>			
<input type="text"/>			
X	<input type="text"/>	<input type="text"/>	Date
Applicant Signature			
X	<input type="text"/>	<input type="text"/>	Date
Other Signature			