PEOPLES BANK PO Box 158 Rock Valley, IA 51247



Visa Consumer Card Application

Peoples Bank continues to be the first choice for your financial services by providing products and services to meet the changing needs of our customers. Offering the convenience and buying power of a credit card, with local servicing from people you know and trust makes a new Visa card from Peoples Bank the right choice.

- LOW ANNUAL PERCENTAGE RATE
- NO ANNUAL FEE
- PAYMENTS ACCEPTED AT PEOPLES BANK
- WORLDWIDE RECOGNITION AND ACCEPTANCE at millions of Merchant Locations, Financial Institutions, and Automated Teller Machines
- CASH BACK REWARDS 0.5% Cash Back on all purchases

Simply complete the attached application and drop it in the mail, or for more information, please contact us at:

1230 Valley Drive PO Box 158 Rock Valley, IA 51247 Office: (712) 476-2746 Fax: (712) 476-2748 CREDIT APPLICATION

Visa Classic

Check Account Choice (Signature required for joint application)

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.

	Last Name			First			Middle		Social Security Number	
tely	Date of Birth No. of Dependents (Home Phone ()		Cell Pr (Cell Phone		Own Rent	Other	Monthly Payment \$
comple tion	Current Address		City			State		Zip Code		How Long (yrs)
APPLICANT Note: All applicable sections should be filled out completely to avoid delay in processing your application	Mailing Address (if different from above)		City			State		Zip Code		How Long (yrs)
uld be fi	Previous Address (if less than 2 years at present address)		City			State		Zip Code		How Long (yrs)
APPLIC. tions sho	Driver's License Number		Driver's License Issue State		Dr	Driver's License Expiration		ion Date		
A e secti elay in	Employer	Self Employed □Yes □ No		Wo (ork Phone)	Date En		mployed		
pplicabl woid de	Employer Address			-	Position/Occupation				Monthly Gross Income \$	
e: All ap to a	Name and Address of Previous Employer (if less than 2 years at present employer) How Long (yrs)									How Long (yrs)
Not	Source of Additional Income: Income from alimony, child support or separate maintenance Amount per Me Need not be revealed if it is not considered in determining creditworthiness \$									Amount per Month \$
	Nearest Relative (Not Living With You)				Hc (ome Phone)	Relati			nship
	Last Name		First				Middle Social		Security Number	
CO-APPLICANT Information about a Co-Applicant is not required for an individual account	Date of Birth	No. of Dependents	Home Phone ()		Cell Pt (hone)	<u> </u>	Own Rent	Other	Monthly Payment \$
	Current Address		City		-	State		Zip Code		How Long (yrs)
	Previous Address (if less than 2 years at present address)		City			State Z		Zip Code		How Long (yrs)
	Driver's License Number Drive			rriver's License Issue State Dri			Driver's License Expiration Date			
Utited for	Employer	Self Employed □Yes □No		Wo (Work Phone ()		Date E		mployed	
Inforn req	Employer Address			•	Position/Occupation			i		Monthly Gross Income \$
	Source of Additional Income: Income from alimony, child support or separate maintenance Amount per Month Need not be revealed if it is not considered in determining creditworthiness \$									
Other loans or obligations. Attach additional sheets if necessary	Name and Address of Creditor			ame Under Which Account is Carried		Account Number		Balance		Monthly Payment
Other loans or obligations. ttach additiona										
) 소문		U. b. four circles. This state		dan obacio condia c			and in a la			
SIGNATURES	inquiries may be made to verify policies of this institution. I/We a receipt of such agreement and a	information and that credit gree to be bound by the ter acceptance of such terms to a time to time. You may repo	d to obtain credit and l/we certify that all information herein is true and complete. l/We agree that ification may be given based on inquiries from other parties. This offer is subject to all the credit s of the cardholder agreement, a copy of which will be mailed to me/us if this application is granted, presumed by my/our use. If this is a joint application, we each shall be jointly and severally liable for yout my account to the credit bureaus. Late payments, missed payments, or other defaults on my X							
	Applicant Signature	D	ate	Co-Applicant Signa						
TOR VIERNAL SE ONLY	Visa Account No.						CIF#			
ч Щ Щ	Date Approved					Approved By				

Peoples Bank VISA Classic Summary of Terms

Interest Rates and Interest Charges	st Charges
Annual Percentage Rate (APR) for Purchases	16.25%
APR for Balance Transfers	16.25%
APR for Cash Advances	16.25%
Penalty APR	N/A
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the transaction date.
Minimum Interest Charge	None
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 website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore
Fees	
Annual Fee	None
Transaction Fees	
Balance Transfer	Either \$3.00 or 3% of the amount of each balance transfer, whichever is greater
Cash Advance	Either 3.00 or 3% of the amount of each cash advance, whichever is greater
Foreign Transaction	Up to 1% of each transaction in U.S. dollars
PenaltyFees	
Late Payment	Up to \$20.00
Over-the-Credit Limit	None
Returned Payment	Up to \$25.00
Other Fees	None
How we will calculate your balance: We use a method is provided in your account agreement.	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 t	Billing rights: Information on your rights to dispute transactions and how to exercise those rights 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

Protections to Members of the Armed Forces and Their Dependents

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 fees for a credit card account). certain application fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation

Information contained herein is accurate as of March 2019 and is subject to change after that date. To inquire if any changes have occurred since printing please call (712) 476-2746 or please write to: Peoples Bank, PO Box 158, Rock Valley, IA 51247.



