

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT** For Military Lending Act Disclosure Information, please call 877.331.2119.

Officer #

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 who opens an account. What this means for you: When you open an account, we will ask for your name, physical 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. **Return Completed Applications to: BankCard Services, P.O. Box 779, Jefferson City, MO 65102; Fax 573-634-1104;**

Interest Rates and Interest Charges	
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>0.00%</b> introductory APR for six (6) statement cycles after account opening. After that, your APR will be <b>14.24% to 23.24%</b> , based on your creditworthiness. This APR will vary with the market based on the Prime Rate.
<b>APR for Balance Transfers</b>	<b>14.24% to 23.24%</b> Your APR will be based on your creditworthiness. This APR will vary with the market based on the Prime Rate.
<b>APR for Cash Advances</b>	<b>27.24%</b> This APR will vary with the market based on the Prime Rate.
<b>Paying Interest</b>	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.
<b>Minimum Interest Charge</b>	If you are charged interest, the charge will be no less than <b>\$1.50</b>
<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 website of the Consumer Financial Protection Bureau at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a> .
Fees	
<b>Annual Fee</b>	<b>None</b>
<b>Transaction Fees</b>	Either <b>\$10</b> or <b>4%</b> of the amount of each transfer, whichever is greater Either <b>\$10</b> or <b>4%</b> of the amount of each cash advance, whichever is greater <b>3%</b> of each transaction once converted into U.S. dollars
<ul style="list-style-type: none"> <li>• Balance Transfer</li> <li>• Cash Advance</li> <li>• International Transaction</li> </ul>	
<b>Penalty Fees</b>	
<ul style="list-style-type: none"> <li>• Late Payment</li> <li>• Returned Payment</li> </ul>	<b>Up to \$25</b> <b>Up to \$25</b>

The information about the costs of the card described in this is accurate as of ( 01/2019 ). This information may have changed after that date. To find out what may have changed, call us at (1-800-445-9272) or write us at BankCard Services, P.O. Box 779, Jefferson City, MO 65102.

**How We will Calculate Your Balance:** We use a method called "average daily balance (including new purchases)."

**Loss of Introductory APR:** We may end your introductory APR and apply the Annual Percentage Rate for Purchases if you make a late payment.

Choose your payment due date:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 26 27 28

If you are applying for a joint account or an account that you and another person will use, complete all Sections, providing information in the Co-Applicant section about the joint applicant or user.

We intend to apply for joint credit. Applicant Signature \_\_\_\_\_ Co-Applicant Signature \_\_\_\_\_

Applicant Information					
First Name	Initial	Last	Birth Date	Social Security Number	
Physical Address, City, State & Zip			Employed by	Work Phone	
Mailing Address, City, State & Zip (if different than above)			Position	Gross Monthly Income*	
Home Phone	Email Address		Residential Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other	Monthly Payment	
Drivers License #	State	Expiration Date	Passport Number	Issue Date	Expiration Date
Co-Applicant Information					
First Name	Initial	Last	Birth Date	Social Security Number	
Physical Address, City, State & Zip			Employed by	Work Phone	
Home Phone	Email Address		Position	Gross Monthly Income*	
Drivers License #	State	Expiration Date	Passport Number	Issue Date	Expiration Date

\*Alimony, child support and maintenance payments need not be revealed if you do not choose to rely on such income to obtain this credit.

I/We (hereinafter referred to as I) hereby apply to The Central Trust Bank (issuing Bank), Jefferson City, Missouri for a credit card account. I have read this application and everything I have stated is true. I am at least 18 years of age. I understand that credit approval is contingent upon an adequate level of income and creditworthiness. I authorize the issuing Bank to check credit, including requests for consumer credit report or reports from one or more consumer reporting agencies, employment history or any other information and to report to others its credit experience with me. I accept that on a periodic basis, the account may be considered for an automatic upgrade at the discretion of the issuing Bank. I understand that the acceptance of use of any card issued will be subject to the terms of this application and the Credit Card Agreement that will be sent with the card and any future amendments thereto. Bank reserves the right to retain this application whether or not it is approved.

Applicant Signature	Date	Co-Applicant Signature	Date
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