IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act 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, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

SECTION A: CHECK THE APPROPRIATE BOX BELOW AND SIGN IF APPLYING FOR JOINT CREDIT

- □ If you are applying for individual credit in your own name, and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections B and E. If the requested credit is to be secured, also complete the first part of Section D and F.
- □ If you are applying for joint credit with another person, complete all Sections except F, providing information in C about the joint applicant. If the requested credit is to be secured, then complete Section F.

WE INTEND TO APPLY FOR JOINT CREDIT: __

Signature of Applicant

Signature of Co-Applicant

□ If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections except F to the extent possible, providing information in C about the person on whose alimony, support, or maintenance payments or income or assets you are relying. If the requested credit is to be secured, then complete Section F.

Amount Request	Payment	: Date	Desired:		Proceeds of Credit to Be Used For:									
SECTION B: INFORMATION REGARDING APPLICANT														
Full Name (Last, First,		0	Pate of birth:				Phone:							
Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty?							ou a dependent of a member of the armed forces w duty or on active Guard or Reserve duty?				/ho is serving on			
ARE YOU A U.S. PERSON?	Drivers License No:			State:	e of Issuance:			Date of Expiration:			SSN or Tax ID:			
🗆 No 🗆 Yes	State ID Card No:			State:	Date	of Issuance:		Date	Date of Expiration:		Military ID:			
(Complete all that apply) Passport No. & Country of Issuance:		Jance:		Individual Taxpayer ID No:		applicati	ID No., but have ion for one. Whe		Government Issued Document N Issuance:			Country of	Other (Tribal ID, etc.)	
Current address:								How long at address?						
Own Rent	(Please circle)			Monthly payment or rent:			Email			address:	iddress:			
Previous address:							How long at address?			Owned	Rented	se circle)		
Present Employer:				Occupation:			Position or Title:			How long with Present Employer?			Supervisor Name:	
Previous Employer:							How long with Previous Employer?							
Present Gross Salary or Commission: \$				per			Present M	Present Net Salary or Commission: \$				per		
No. Dependents: Ages of Dependents:														
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying														
this obligation	Alimony, child support, or sep	arate mainten	nance red	ceived under:	Court	t Order	Written	Agreeme	nt 🗌 Ora	I Understand	ng			
Other Income: \$	Sources of Other Ind			Have you ever received credit from					us? 🗌 No 🗌 Yes – When?					
Is any income listed in this Section likely to be reduced before the credit requested is paid off?							g Acct # s Acct #			Where? Where?				
Name of nearest relat			Relationship:											
Address:						Phone:								
SECTION C: INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY														
Full Name (Last, First, Middle):							Date of birth:					Phone:		
Are you a member of the armed forces who is serving on active duty or on active Guard or Reserve duty?				No 🗆 Yes					a member of the armed forces wh Guard or Reserve duty?		no is serv		🗆 No 🗌 Yes	
ARE YOU A		State:			of Issua	ance:	ce: Date of		Date of Expiration:		SSN or Tax ID:			
U.S. PERSON? State ID Card No:				State:		of Issua	ance:	Date of Expiration			Military ID:			
(Complete all that apply)						ayer ID No., but have blication for one. When		Government Issued Document No Country of Issuance:		lo. and		Other (Tribal ID, etc.)		

Current address:							How long at	address?		
Own Rent (Please circle) Monthly				payment or rent:				il address:		
Previous address:				How long at address?			Owned Rented (Plea		circle)	
Present Employer:			Occupation:			on or Title:		How long with Present Supervisor Na Employer?		Supervisor Name:
Previous Employer:		How long wit					vious Employer?			
Present Gross Salary or Commission: \$	ber		P	Present Net Salar	y or Commissio	on: \$		per		
No. Dependents:										
Alimony, child support, or separate mainter	nance inco	ome	need not b	e reveale	ed if y	ou do not w	ish to hav	e it considered	l as a basis f	for repaying
this obligation. Alimony, child support, or separate maintenance received under:										
Other Income: \$ per Sources of Other Income: Have you ever received credit from us? No Yes – When?										Yes – When?
Is any income listed in this Section likely to be reduced before the credit requested is paid off?	any income listed in this Section likely to be Checking Acct # Where?									
Name of nearest relative not residing with you:							Re	lationship:		
Address:								Phone:		
SECTION D: MARTIAL STATUS (D	O NOT CO	OMP	LETE IF TH	IS IS AN		LICATION	FOR INDI	VIDUAL UNSE	CURED CRI	EDIT)
Applicant Married Separated Ur	nmarried (1	Inclu	uding sinale.	divorced.	or wi	idowed)				
Other Party Married Separated Ur	,		5 5 ,			,				
Guier Farty in Marrieu in Separateo in Ur			N E: ASSET							
If Section C has been completed, this Section should be completed	eted, giving info	forma	tion about both				Other Person. P	lease mark Applican	-related informa	tion with an "A".
If Section C was not completed, only give information about the	e Applicant in t	this S	ection.							
ASSETS OWNED (Use separate sheet if necessary)						CUDICOT	то			
DESCRIPTION OF ASSETS					E	SUBJECT TO DEBT Yes/No		NAMES		
Cash										
Automobiles (Make, Model, Year)										
1										
2										
3										
Cash Value of Life Insurance (Issuer, Face Value)										
Real Estate (Location, Date Acquired)										
Marketable Securities (Issuer, Type, No. of Shares)										
Other (List)										
TOTAL ASSETS				\$						
OUTSTANDING DEBTS	cards root	mort	agaes ats Us		cheat	if percentry)				
(Include charge account, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary) CREDIT CARDS										
Name	A	٩٠٢٩	unt no.	-211 CA		Current	t Balance	Monthly	Payment	Past Due?
						Current	Salarice	Pionally	ayment	
MORTGAGE										
	1			IUKIGA	JE					
Mortgage Company Account no.						Current Ba	lance	Monthly Pa	/ment	Past Due?

AUTO LOANS												
Auto loans	Account no.		Balance Monthly		r Payment	Past Due?						
My Auto Insurance Agent Is: (Name & Address)												
CREDIT REFERENCES (Paid Off Accounts)												
Name in Which Account is Carried	Account no.		Balance		Date Paid Off							
Are you the co-maker, endorser, or guarantor on any loan or contract?	□ No	☐ Yes – For Whom? To Whom?										
Are there any unsatisfied judgments against you?	🗆 No	☐ Yes – Amount? If YES, To Whom 0	Dwed?									
Have you been declared bankrupt in the last 10 years?	🗆 No	Yes – Where? Year?										
OTHER OBLIGATIONS (For example, liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)												
SECTION F: SECURED CREDIT (COMPLETE ONLY IF CREDIT IS TO BE SECURED.) BRIEFLY DESCRIBE THE PROPERTY TO BE GIVEN AS SECURITY												
Property Description:												
Name & Addresses of all Co-Owners of the Property:												
If the security is real estate, give the full name of your spouse ((if any):											
<u>CREDIT DISCLOSURES:</u> An insurance product or annuity or annuity is <u>not a deposit or other obligation of</u> , or <u>qua</u> Crop Insurance, the insurance product or annuity is <u>not</u> this institution or our affiliate(s); and (3) In the ca associated with the insurance product, including t extension of credit on either of the following: (1) agreement not to obtain, or a prohibition on you from o	<u>ranteed by,</u> th <u>insured</u> by th ase of an insu he <u>possible l</u> Your purcha	his institution or our af he Federal Deposit I irance product or an <u>oss of value</u> . If an in ase of an insurance	filiate(s); (2) W nsurance Corp nuity that invo surance produ product or an	ith exception of oration or any olves an <u>invest</u> ct or annuity i nuity from us	Federal Flood Insu other agency of t ment risk, there is s offered we cann or any of our affil	rance or Federal he United States, s <u>investment risk</u> ot condition an						
Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. I authorize <i>First Heritage Bank</i> to verify the information provided on this form and check my credit and employment history and answer questions about your credit experience with me.												
Unless I have purchased the insurance product(s) by mail or if Disclosures orally at the time I have applied for credit and fully receipt by my disclosure.												
Signature of applicant X					Date							
Signature of co-applicant, if for joint account X					Date							

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620 Fourth Street P.O. Box 188 Centralia, KS 66415 (785) 857-3341

6501 Main Street Corning, KS 66417 (785) 868-2410 7450 W 130th Street Suite 100 Overland Park, KS 66213 (913) 955-3110 906 North Street P.O. Box 188 Seneca, KS 66538-0188 (785) 336-3516

300 Main Street Vermillion, KS 66544 (785) 382-6221

FEDERAL CONSUMER CREDIT DISCLOSURE

<u>CREDIT DISCOLSURES:</u> An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is <u>not a deposit or other obligation of</u>, or <u>guaranteed</u> <u>by</u>, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is <u>not insured</u> by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an <u>investment risk</u>, there is <u>investment risk</u> associated with the insurance product, including the <u>possible</u> <u>loss of value</u>. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

Thank you for expressing interest in applying to First Heritage Bank for one of our loan products. We look forward to meeting your financing needs.

Instructions

Please complete this application and return it to one of our convenient locations or you can mail it to our main office listed below. If you have any questions please feel free to call the loan department at (785)857-3341.

First Heritage Bank Attn: Loan Department Box 188 Centralia, KS 66415

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