



BANK OF LOUISIANA
101 SOUTH THIRD STREET
LOUISIANA, MO 63353
573-754-5517

Thank you for considering Bank of Louisiana for your financial needs. We are looking forward to the opportunity to serve you. Please read the following instructions prior to completing the Credit Application, Insurance Disclosure and Military Status Verification Forms. In order to better serve you please fill out, sign and date the documents as instructed below.

CREDIT APPLICATION

Please complete the application in its entirety.

Section A – Individual Applicant

If applying for individual credit, please complete this part of the application in its entirety.

Section B – Joint Applicant or Other Party Information

If applying for joint credit, joint applicant or other party must complete this part of the application in its entirety.

Section C - Marital Status

Please follow instructions on application.

Section D – Asset & Debt Information

Please fill out this part of the application for both applicant and any joint applicant.

Section E – Secured Debt

Complete this section unless you are applying for an unsecured loan. If applying for a secured loan, give a complete description of the property you will provide as security for the loan.

SIGNATURES

APPLICANT AND CO-APPLICANT MUST SIGN AND DATE THE APPLICATION.

INSURANCE DISCLOSURES – CONSUMER CREDIT APPLICATIONS

Applicant must sign and date this document.

If there is a co-applicant, that person must also sign and date this document. You may keep the copy.

COVERED BORROWER IDENTIFICATION STATEMENT

Applicant – Please read and sign the statement that applies to you.

Co-Applicant - Please read and sign the statement that applies to you.

ACKNOWLEDGEMENT OF RECEIPT PRIOR TO TRANSACTION

Both Applicant and Co-Applicant must sign and date this part of the document.

You may keep the copy.

FACTS: WHAT DOES the Bank of Louisiana DO WITH YOUR PERSONAL INFORMATION?

This Document is for information purposes for you to read and keep.

REGULATION B- NOTICE OF INTENT TO APPLY FOR JOINT CREDIT

Please sign this notice if you are applying for Joint Credit.

Each Borrower must sign this document prior to closing the loan. You may keep the copy.

Credit Application

BANK OF LOUISIANA
101 SOUTH 3RD STREET
LOUISIANA, MO 63353

Important Information to Applicant(s). 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 applies for a loan or opens an account. **What this means for you.** When you apply for a loan or 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. In some instances, we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law. **Read each instruction carefully before completing this form.**

Creditor

("You" means Applicant, *et al*; and "We" means Creditor)

For Creditor Use		
Account No.	Class No.	Date Received

1. Type of Application

Check only one of the three types:

- | | |
|---|--|
| <input type="checkbox"/> Individual Credit - You are relying <u>solely</u> on your income or assets.
<input type="checkbox"/> Individual Credit - You are relying on your income or assets as well as income or assets from other sources. | <input type="checkbox"/> Joint Credit - By initialing below, you intend to apply for "joint credit".
Applicant _____ Joint Applicant _____ |
|---|--|

2. Type of Requested Credit

Application Date	Amount \$	Financing Type <input type="checkbox"/> New <input type="checkbox"/> Refinance <input type="checkbox"/> Modification	No. of Months	Repayment Interval <input type="checkbox"/> Monthly <input type="checkbox"/>	First Payment Date
Credit Type <input type="checkbox"/> Line of Credit <input type="checkbox"/> Loan <input type="checkbox"/> Sale <input type="checkbox"/> Lease	Loan Purpose <input type="checkbox"/> Agricultural <input type="checkbox"/> Business <input type="checkbox"/> Consumer	Security for Credit <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured	Proceeds of Credit to Be Used for <input type="checkbox"/> To purchase property that will secure your credit <input type="checkbox"/> To purchase property that is a residential dwelling and is not real estate <input type="checkbox"/> To finance home improvements to a residential dwelling <input type="checkbox"/> Other (<i>describe</i>):		

Applicant

3. Applicant Information

Joint Applicant or Other Party

Full Name (<i>First, Middle, Last</i>)			Full Name (<i>First, Middle, Last</i>)		
Gov't ID Type	Gov't ID No.	Gov't ID Issued By	Gov't ID Type	Gov't ID No.	Gov't ID Issued By
Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth	Gov't ID Issue Date	Gov't ID Exp. Date	Date of Birth
Soc. Sec. No.	Primary Phone <input type="checkbox"/> Cell	Second Phone <input type="checkbox"/> Cell	Soc. Sec. No.	Primary Phone <input type="checkbox"/> Cell	Second Phone <input type="checkbox"/> Cell
Email Address:			Email Address:		
Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:			Present Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:		
Previous Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:			Previous Address <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> No. of Yrs.:		
Dependents No.: Ages:			Dependents No.: Ages:		
Nearest Relative (<i>not living with you</i>) Name: Address: Telephone: <input type="checkbox"/> Cell			Nearest Relative (<i>not living with you</i>) Name: Address: Telephone: <input type="checkbox"/> Cell		
Your Relationship to us (or our affiliate) <input type="checkbox"/> None <input type="checkbox"/> Employee <input type="checkbox"/> Insider (Shareholder, Director, Officer)			Your Relationship to us (or our affiliate) <input type="checkbox"/> None <input type="checkbox"/> Employee <input type="checkbox"/> Insider (Shareholder, Director, Officer)		
Have you ever received credit from us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when: office/branch:			Have you ever received credit from us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when: office/branch:		



Applicant	5. Employment Information	Joint Applicant or Other Party
1st Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	1st Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	1st Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:
2nd Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	2nd Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	2nd Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:
3rd Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	3rd Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:	3rd Employer: <input type="checkbox"/> Current <input type="checkbox"/> Previous <input type="checkbox"/> Self No. of Yrs.: Name: Address: Mgr.: Phone: Gross Monthly Salary/Comm.: \$ Position/Title:

Applicant	6. Other Income	Joint Applicant or Other Party
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, separate maintenance received under: <input type="checkbox"/> Court order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding	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, separate maintenance received under: <input type="checkbox"/> Court order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding	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, separate maintenance received under: <input type="checkbox"/> Court order <input type="checkbox"/> Written agreement <input type="checkbox"/> Oral understanding
Other Income: \$ _____ per Month Source:	Other Income: \$ _____ per Month Source:	Other Income: \$ _____ per Month Source:
Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off: <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No	Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off: <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No	Is any income listed in Sections 4, 5 or 6 likely to be reduced before the credit is paid off: <input type="checkbox"/> Yes (Explain in section 10.) <input type="checkbox"/> No

Applicant	7. Other Obligations	Joint Applicant or Other Party
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount: \$ For whom: To whom:	Are you a co-maker, endorser, co-signer, surety, or guarantor on any loan, contract or other obligation?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount: \$ For whom: To whom:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:	Are there any unsatisfied judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Where: Year:	Have you been declared bankrupt in the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Where: Year:
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:	Are you obligated to make Alimony, Support or Maintenance Payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Amount per month: \$ To whom:

8. Property Information (if secured)		
Property Type <input type="checkbox"/> Boat or Vessel <input type="checkbox"/> Certificate of Deposit <input type="checkbox"/> Deposit Account <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Motor Vehicle <input type="checkbox"/>	Property Description <input type="checkbox"/> Residential Dwelling <input type="checkbox"/> Homestead Property	Property Location and Address
Primary Use of Property <input type="checkbox"/> Agricultural <input type="checkbox"/> Business <input type="checkbox"/> Consumer	Property Owner(s) Names & Addresses	



Applicant	9. Marital Status	Joint Applicant or Other Party
<p><i>Leave blank, unless:</i></p> <p>(1) <i>the credit will be secured, or</i> (2) <i>you reside in a community property state, or</i> (3) <i>you are relying on property, located in a community property state, as a basis for repayment.</i></p> <p><input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)</p>		<p><i>Leave blank, unless:</i></p> <p>(1) <i>the credit will be secured, or</i> (2) <i>you reside in a community property state, or</i> (3) <i>you are relying on property, located in a community property state, as a basis for repayment.</i></p> <p><input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)</p>

10. Additional Information or Explanations

11. Notices

California Residents. Each applicant, if married, may apply for a separate account.

New York Residents. A consumer report may be ordered in connection with your application. Upon your request, we will inform you whether or not a report was ordered. If a report was ordered, we will tell you the name and address of the consumer reporting agency that provided the report. Subsequent reports may be ordered or utilized in connection with an update, renewal or extension of credit for which you have applied.

Ohio Residents. The Ohio laws against discrimination require all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.
Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Texas Residents. The owner of the homestead is not required to apply the proceeds of the extension of credit to repay another debt except debt secured by the homestead or debt to another lender.

Wisconsin Residents. Notice to Married Applicants. No provision of any marital property agreement, unilateral statement under Wisc. Statutes § 766.59 or a court decree under Wisc. Statutes § 766.70 adversely affects the interests of the Creditor unless the Creditor, prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision when the obligation to the Creditor is incurred.
For Married Wisconsin Residents. The credit being applied for, if granted, will be incurred in the interest of my marriage or family. I understand the Creditor may be required by law to give notice of this transaction to my spouse.

12. Certifications, Authorizations and Signatures

You certify that everything you have stated in this Credit Application and on any other documents submitted to us are true and correct to the best of your knowledge. You understand that you must update the information contained in this Credit Application if either your financial condition materially changes or we make a request to you orally or in writing. You understand that we will retain this Credit Application whether or not it is approved.

You authorize us to request one or more consumer reports, to check and verify your credit and employment history, and to answer questions others may ask us about our credit experience with you.

You authorize us to contact you using any of the telephone numbers listed on this Credit Application or that you subsequently provide us in connection with your credit account - regardless whether the number we use is assigned to a paging service, cellular telephone service, specialized mobile radio service, other radio common carrier service or any other service for which you may be charged for the call. You further authorize us to contact you through the use of voice, text and email and through the use of prerecorded/artificial voice messages or an automatic dialing device.

Electronic Signature. If checked, You further agree that you have signed this *Credit Application* with one or more electronic signatures. You intend your electronic signature to have the effect of your written ink signature. You viewed and read the entire *Credit Application* and notices before you signed it. You received a paper copy of this *Credit Application* after it was signed. You understand that this *Credit Application* is in the electronic form that we will keep. We may rely on, and enforce, this *Credit Application* in the electronic form or as a paper version of the electronic form.

<u>Applicant Signature</u>	<u>Date</u>	<u>Joint Applicant, or Other Party, Signature</u>	<u>Date</u>
		(if applicable)	

Notice: It is a federal crime punishable by fine, imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code § 1001, *et seq.*

Mortgage Loan Originator Information

If this *Credit Application* is secured by a consumer's residential dwelling that is owned by you, we may be required under federal or state law to disclose our mortgage loan origination identification number(s), which are as follows, if applicable:

- ◆ Mortgage Loan Originator Name and Identifier:
- ◆ Mortgage Loan Origination Company Name and Identifier:

For Creditor Use					
Date Received	Received By	Date Action Taken	Action Taken By	Action Taken	Reason Code(s)



COVERED BORROWER IDENTIFICATION STATEMENT

Federal law provides important protections to active duty members of the Armed Forces and their dependents. To ensure that these protections are provided to eligible applicants, we require you to **check and sign one** of the following statements as applicable:

- I AM a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer.

Signature _____ Date _____

Signature _____ Date _____

- I AM a dependent of a member of the Armed Forces on active duty as described above, because I am the member's spouse, the member's child under the age of eighteen years old, or I am an individual for whom the member provided more than one-half of my financial support for 180 days immediately preceding today's date.

Signature _____ Date _____

Signature _____ Date _____

OR

- I AM NOT a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer (or dependent of such a member).

Signature _____ Date _____

Signature _____ Date _____

Warning: It is important to fill out this form accurately. Knowingly making a false statement on a credit application is a crime.

ACKNOWLEDGEMENT OF RECEIPT PRIOR TO TRANSACTION

I acknowledge receiving this document and signing the applicable identification statement prior to becoming obligated on the transaction.

X _____
Applicant's Signature

X _____
Applicant's Signature

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:**

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date or within three (3) days if I have applied by telephone. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

BORROWER:

_____ Date _____

For Telephone Applications Only:

As an authorized representative of Lender, I confirm that I have made the above Credit Application Insurance Disclosures orally to the Applicant(s) and that the receipt of the oral disclosures were acknowledged orally by the Applicant(s). I also confirm that I have mailed to the Applicant(s) the above Credit Application Insurance Disclosures within three (3) days beginning the first business day after the application is taken, excluding Sunday and federal public holidays.

Authorized Representative

(Date)

REGULATION B - NOTICE OF INTENT TO APPLY FOR JOINT CREDIT

APPLICANTS:

LENDER:

BANK OF LOUISIANA
101 South Third Street
Louisiana, MO 63353

NOTICE. We intend to apply for joint credit.

ACKNOWLEDGMENT. By signing below, we acknowledge the intention to apply for joint credit on

_____ Date _____

_____ Date _____

FACTS

WHAT DOES DO WITH YOUR PERSONAL INFORMATION?

Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> ■ Social Security number and ■ and ■ and <p>When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.</p>
How?	All financial companies need to share personal information to run their everyday business. In the section below, we list the reasons financial companies can share their personal information; the reasons chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus		
For our marketing purposes— to offer our products and services to you		
For joint marketing with other financial companies		
For our affiliates' everyday business purposes— information about your transactions and experiences		
For our affiliates' everyday business purposes— information about your creditworthiness		
For nonaffiliates to market to you		

Questions?	Call or go to
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Who we are

Who is providing this notice?

What we do

How does protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.

How does collect my personal information?

We collect your personal information, for example, when you

- or
- or
-

Why can't I limit all sharing?

Federal law gives you the right to limit only

- sharing for affiliates' everyday business purposes—information about your creditworthiness
- affiliates from using your information to market to you
- sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

Definitions

Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

-

Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

-

Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

-

Other important information