

**Visa Classic**  
 **Visa Platinum**

**VISA APPLICATION**

Name – Primary Applicant		Social Security Number		Date of Birth
Address		City	State	Zip
Mailing Address (if different)		City	State	Zip
Home Phone	Employer (also fill in if self-employed)	Employer Phone	Length of Employment	
Gross Monthly Income	Occupation		Mother's Maiden Name	
Additional Card or Authorized User? Please print name(s)		Number of Cards on Account	Requested Credit Limit	

Name – Co-Applicant		Social Security Number		Date of Birth
Address		City	State	Zip
Home Phone	Employer	Employer Phone	Length of Employment	
Gross Monthly Income	Occupation		Mother's Maiden Name	

**CREDIT INFORMATION**

Bank Name & Address					
Checking Account # & Name(s) on Account		Checking Account # & Name(s) on Account		Savings Account # & Name(s) on Account	
Name & Address of Creditor			Monthly Payment	Balance on Account	
Name & Address of Creditor			Monthly Payment	Balance on Account	
Name & Address of Creditor			Monthly Payment	Balance on Account	
<b>Attach an additional sheet if necessary</b>					

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 references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of The Exchange Bank of Alabama. I/We agree to be bound by the terms and conditions of the bank 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 applicants use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

Signature – Primary Applicant	Date	Signature – Co-Applicant	Date
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**AUTOMATIC PAYMENT DEDUCTION**

Exchange Bank Checking Account Number: _____		<input type="checkbox"/> Minimum Payment	<input type="checkbox"/> Balance in Full
I hereby authorize The Exchange Bank of Alabama to charge my Exchange Bank checking account monthly.			
Signature		Date	

**EASY BALANCE TRANSFER REQUEST FORM**

1. NAME OF CARD ISSUER		ACCOUNT NUMBER	
PAYMENT ADDRESS		EXACT AMOUNT TO BE TRANSFERED	
2. NAME OF CARD ISSUER		ACCOUNT NUMBER	
PAYMENT ADDRESS		EXACT AMOUNT TO BE TRANSFERED	
3. NAME OF CARD ISSUER		ACCOUNT NUMBER	
PAYMENT ADDRESS		EXACT AMOUNT TO BE TRANSFERED	

Yes! Upon approval, I wish to transfer my present balance on the credit card account(s) listed above to my new credit card account.

Signature	Date
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## COST DISCLOSURE

<p><b>Annual Percentage Rate(APR) for Purchases</b></p>	<p><b>Platinum Pricing:</b> 7.24% Variable Rate. This APR will vary with the market based on Prime Rate.  <b>3.99% Introductory APR</b> for the first 6 billing cycles that your account is open. After that, <b>7.24%</b> (prime + 3.99%).  <b>Premium Classic Pricing:</b> 11.24% Variable Rate. This APR will vary with the market based on Prime Rate.  <b>5.99% Introductory APR</b> for the first 6 billing cycles that your account is open. After that, <b>11.24%</b> (prime plus 7.99%).  <b>Standard Classic Pricing:</b> 15.24% Variable Rate. This APR will vary with the market based on Prime Rate. (Prime plus 11.99%).  <b>Your APR will Be Based on your creditworthiness.</b></p>
<p><b>APR for Balance Transfers</b></p>	<p><b>Platinum Pricing:</b> 7.24% Variable Rate. This APR will vary with the market based on Prime Rate.  <b>3.99% Introductory APR</b> for the first 6 billing cycles that your account is open. After that, <b>7.24%</b> (prime + 3.99%).  <b>Premium Classic Pricing:</b> 11.24% Variable Rate. This APR will vary with the market based on Prime Rate.  <b>5.99% Introductory APR</b> for the first 6 billing cycles that your account is open. After that, <b>11.24%</b> (prime plus 7.99%).  <b>Standard Classic Pricing:</b> 15.24% Variable Rate. This APR will vary with the market based on Prime Rate. (Prime plus 11.99%).  <b>Your APR will Be Based on your creditworthiness.</b></p>
<p><b>APR for Cash Advances</b></p>	<p><b>Platinum Pricing:</b> 7.24% Variable Rate. This APR will vary with the market based on Prime Rate.  <b>3.99% Introductory APR</b> for the first 6 billing cycles that your account is open. After that, <b>7.24%</b> (prime + 3.99%).  <b>Premium Classic Pricing:</b> 11.24% Variable Rate. This APR will vary with the market based on Prime Rate.  <b>5.99% Introductory APR</b> for the first 6 billing cycles that your account is open. After that, <b>11.24%</b> (prime plus 7.99%).  <b>Standard Classic Pricing:</b> 15.24% Variable Rate. This APR will vary with the market based on Prime Rate. (Prime plus 11.99%).  <b>Your APR will Be Based on your creditworthiness.</b></p>
<p><b>Paying Interest</b></p>	<p>Your due date is at least 25 days after close of each billing cycle.  We will not charge you any interest on purchases if you pay your entire balance by the due date each month.  The Interest charge on cash advances begins from the date you obtain the cash advance.  The Interest charge on balance transfers begins from the date the transaction is posted to your account.</p>
<p><b>For Credit Card Tips from Federal Reserve Board</b></p>	<p>To learn more about factors to consider when applying for or using a credit card, visit the website of the <b>Consumer Finance Bureau</b> at <a href="http://www.consumerfinance.gov/learnmore">http://www.consumerfinance.gov/learnmore</a></p>
<p><b>Annual Fee</b></p>	<p><b>\$20.00 / \$0</b> for Platinum</p>
<p><b>Transaction Fees</b>  •Cash Advance Fee  •Foreign Transaction Fees</p>	<p><b>3%</b> Of Cash advanced (<b>Minimum \$15.00 and Maximum \$75.00</b>)  Currency Conversion <b>1%</b> U.S. dollar amount of transaction.</p>
<p><b>Penalty Fees</b>  •Late Payment Fee  •Return Payment Fee  •Declined Access Check Fee</p>	<p>Up to <b>\$35.00</b>  Up to <b>\$35.00</b>  Up to <b>\$35.00</b></p>
<p><b>Other Fees</b>  •Pay by Phone Fee</p>	<p><b>\$10.00</b> Fee only imposed when speaking to a live representative.</p>

**Variable Rate:** We calculate your variable rate by adding a percentage to the Prime Rate published in The Wall Street Journal and is subject to change when Prime Changes.

# Consumer Disclosure

## IMPORTANT INFORMATION

**Interest Charge Calculation Methods (ICM) and Computation of Balance Subject to Interest Rate.** The **Interest Charge** Calculation Method applicable to your account for Cash Advances and Credit Purchases of goods and services that you obtain through the use of your card is explained below:

**Method A - Average Daily Balance** (including new transactions). The **Interest Charge** on purchases begins from the date the transaction is posted to your account, and the **Interest Charge** on cash advances begins from the date you obtained the cash advance, or the first day of the billing cycle in which it is posted to your account, whichever is later. There is no grace period.

The **Interest Charges** for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of your account. To get the average daily balance, we take the beginning balance of your account each day, add any new purchases or cash advances, and subtract any payments, credits, non-accruing fees and unpaid interest charges. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle.

Method G- Average Daily Balance (including new transactions). To avoid incurring additional **Interest Charges** on the balance of purchases (and cash advances, if Method G is specified as applicable to cash advances) reflected on your monthly statement and, on any new purchases (and if applicable, cash advances) appearing on your next monthly statement, you must pay the entire "New Balance" in full, shown on your monthly statement, on or before the Payment Due Date.

The **Interest Charges** for a billing cycle are computed by applying the Periodic Rate to the "average daily balance" of purchases (and if applicable, cash advances). To get the average daily balance, we take the beginning balance of your account each day, add any new purchases or cash advances, and subtract any payments, credits, non-accruing fees, and unpaid interest charges. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the average daily balance.

**Payment Crediting and Credit Balance.** Payments received by 5PM at the location specified on the front of the statement after the phrase "Please Mail Your Payment To:" will be credited as of the date of receipt to the account specified on the payment coupon. Payments made in person during normal business hours at branch locations where such payments are accepted will be treated as received on the same day. Payments must be made in U.S. dollars. Payments that do not conform to the requirements set forth on or with the periodic statement (e.g. missing payment stub, payment envelope other than as provided with your statement, multiple checks or multiple coupons in the same envelope) may be subject to delay in crediting, but shall be credited within five days of receipt. If there is a credit balance due on your account, you may request, in writing, a full refund. Submit your request to the address indicated on the front of this statement after the phrase "**Please send Billing Inquiries and Correspondence to:**"

By sending your check, you are authorizing the use of the information on your check to make a one-time electronic debit from the account on which the check is drawn. This electronic debit, which may be posted to your account as early as the date your check is received, will be only for the amount of your check. The original check will be destroyed and we will retain the image in our records. If you have questions please call the customer service number on the front of this billing statement.

**Closing Date.** The closing date is the last day of the billing cycle; all transactions received after the closing date will appear on your next statement.

**Annual Fee.** If your account has been assessed an annual fee, you may avoid paying this annual fee by sending written notification of termination within 30 days following the mailing date of this bill, to the address listed on the front of this statement after the phrase "**Please send Billing Inquiries and Correspondence to:**"

**Payment Crediting and Credit Balance.** Payments received by 5PM at the location specified on the front of the statement after The phrase "Please Mail Your Payment TO:" will be credited as of the date of receipt to the account specified on the payment coupon. Payments made in person during normal business hours at branch locations where such payments are accepted will be treated as received on the same day. Payments must be made in U.S. dollars. Payments that do not conform to the requirements set forth on or with the periodic statement (e.g. missing Payment stub, payment envelope other than as provided with your statement, multiple checks or multiple coupons in the same envelope) may be Subject to delay in crediting, but shall be credited within five days of receipt. If there is a credit balance due on your account, you may request, in writing, a full refund.

By sending your check, you are authorizing the use of the information on your check to make a one-time electronic debit form the account on which the check is drawn. The electronic debit, which may be posted to your account as early as the date your check is received, will be only for the amount of your check. The original check will be destroyed and we will retain the image in our records. If you have any questions please call the customer service number on the front of the billing statement.

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## Consumer Disclosure

**Negative Credit Reports.** You are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations.

### **BILLING RIGHTS SUMMARY**

#### **What To Do if You Think You Find a Mistake on Your Statement**

If you think there is an error on your statement, write to us at the address shown on the front of the billing statement after the phrase **“Please send Billing Inquiries to.”** In your letter, give us the following information:

- Account Information: Your name and account number.
- Dollar Amount: The dollar amount of the suspected error.
- Description of Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within **60** days after the error appeared on your statement. You must notify us of any potential errors in writing (or electronically). You may call us, but if you do, we are not required to investigate any potential errors and you may have to pay the amount in question. While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The Charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

#### **Your Rights if You Are Dissatisfied With Your Credit Card Purchases**

If you are dissatisfied with the goods or services that you have purchased with your credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase. To use this right, all of the following must be true:

1. The purchase must have been made in your home state or within **100** miles of your current mailing address; and the purchase price must have been more than **\$50**. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or Services.)
2. You must have used your credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses your credit card account do not qualify.
3. You must not yet have fully paid for the purchase

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us in writing (or electronically) at the address shown on the front of the billing statement following the phrase **“Please send Billing Inquiries to:”**

While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay, we may report you as delinquent.

## TERMS GOVERNING THE USE OF YOUR CARD

The person ("Cardholder") whose name is embossed on the face of the Visa ("Card") enclosed herewith, and each Cardholder, in the event more than one Card is enclosed herewith bearing the same account number, by signing or using said Card, receipt of which is acknowledge, agrees with the Issuer of the Card whose name is printed on the reverse ("The Exchange Bank of Alabama") as follows

- A. Goods and Services ("Credit Purchases") may be purchased or leased by means of such card by Cardholder for any retail Business establishment ("Seller") who honors same upon the execution of a sales slip evidence such Credit Purchases and bearing the account number of Cardholder embossed on the face of such Card. Additionally, VISA Cash Advances ("Loans") may be obtained through use of such Card (a) upon execution of a written request of Cardholder in a form furnished to Cardholder from any financial institution that is a member, alone or in association with others, of VISA U.S.A. Inc. and (b) upon execution of a written separate agreement with issuer for a VISA overdraft financing agreement if offered by Issuer.
- B. Cardholder shall be liable and agrees to pay Issuer for Credit Purchases made by, or for Loans extended to, Cardholder or anyone else using such Card unless the use of such Card is by a person other than the Cardholder (a) who does not have actual, implied or apparent authority for such use, and (b) from which Cardholder receives no benefit. Additionally, Cardholder shall be jointly and severally liable and agrees to pay for all Credit Purchases and Loans obtained through the use of any other Card bearing Cardholder's account number that been issued to another person by reason of such person being a member of Cardholder's family, or otherwise issued upon Cardholder's request (all such Cards bearing the VISA account number hereinafter collectively called ("Related Cards")).
- C. Cardholder agrees to pay to Issuer an annual membership fee (as stated in the Disclosures for participation in the Issuer's credit card plan. Such annual membership fee shall be imposed whether or not Cardholder uses the card to obtain credit purchases and loans. The membership fee shall be charged to Cardholder's account each year in the month of Issuer's choice. The membership fee is not refundable in the event of termination account by either Cardholder or Issuer unless otherwise provided for by law.
- D. Each Card is the property of Issuer, is not transferable and must be surrendered upon demand. It can be canceled as well as reposed by Issuer or its designee, and the privileges thereof revoked, at any time without prior notice.
- E. Cardholder shall not use the Card or permit the use of Related Cards to obtain Credit Purchases or Loans, which will increase Cardholder's indebtedness to Issuer to an amount in excess of the limit established by Issuer.
- F. All Credit Purchases and Loans are effected at the option of the Seller and Cash Advancing Financial Institution respectively, and Issuer shall not be responsible for refusal by any Seller or Cash Advancing Financial Institution to honor the Card or any Related Card. Any refund, adjustment or credit allowed by Seller shall not be cash but rather by a credit advice to Issuer which shall be shown as a credit on Cardholder's account statement with Issuer.
- G. Issuer will send to Cardholder, at monthly intervals determined by Issuer, a statement reflecting for the prior monthly period all VISA Card and Related Card transactions. Such statement shall be deemed correct and accepted by Cardholder and all holder of Related Card unless Issuer is notified to the contrary in writing 60 days of mailing of such statement. Cardholder will pay such statement by remitting to Issuer within 25 days of the closing date reflected on the statement either the full amount billed or, at Cardholder's option, an installment equal to at least the required minimum payment.
- H. Interest on Loans and Credit Purchases will be charged in accordance with the finance charge calculation method of the disclosure. The rate of Interest shall be established by Issuer from time to time, but shall never exceed the maximum rate permitted by law. The current interest rate per annum is the Annual Percentage Rate set forth in the Disclosure.
- I. If the Card is canceled or surrender is demanded by Issuer, or If Cardholder defaults in any payment due, or is deceased, bankrupt or insolvent, or any attachment or garnishment proceeding are initiated against Cardholder or his property, Issuer may elect to declare all amounts then owed to Issuer to be immediately due and payable without notice or demand of any kind. If Cardholder has other loans from Issuer, or takes out other loans with Issuer in the future, collateral securing those loans will also secure the Cardholder's obligations under this agreement. However, unless the Cardholder expressly agrees otherwise, the Cardholder's household goods and dwelling will not secure Cardholder's obligations under this agreement even if Issuer has or later acquires a security interest in the household goods or a mortgage on the dwelling. Cardholder agrees to pay all cost incurred by Issuer in collecting Cardholder's indebtedness or in enforcing this agreement, including reasonable attorney's fees and also those costs, expense and attorney's fees incurred in appellate, bankruptcy and post-judgment proceedings, except to the extent such costs, fees or expenses are prohibited by law.
- J. This agreement may be amended from time to time by Issuer by written notice mailed to Cardholder's last known address.
- K. Except to the extent that Federal law is applicable, the validity, construction and enforcement of this agreement and all matter's arising out of the issuance and use of the Card shall be governed by the laws of the state in which the principal office of Issuer is located.
- L. Additional charges, plus applicable taxes, may also be assed if you pay us with a check not honored by your financial institution, request a copy of a document, request a replacement card or use your card for a transaction at an automated teller machine, if such charges are not prohibited by law or regulation. No finance Charge will be assessed on such additional charges.
- M. If it is believed that the Card has been lost or stolen or used in an unauthorized manner, the Cardholder shall contact Issuer AT ONCE, in order to minimize possible losses. In most cases, the Cardholder will not be liable for any unauthorized transactions unless it is determined that the Cardholder was grossly negligent in the handling of the Card. Notification can be made orally or in writing at:

Credit Card Security Department	Telephone Number
P.O.Box 30035	(727) 570-4881
Tampa, Florida 33630	
- N. Cardholder agrees that Issuer, its agents or service companies may monitor and/or record any telephone communications with Cardholder.
- O. Payments must be made to the Issuer in U.S. dollars drawn on a U.S. Financial Institution. If Cardholder incurs charges in any other currency, the charges will be converted into U.S. dollars. The exchange rate for transactions in a foreign currency will be a rate selected by Visa from the range of rates available in wholesale currency markets for the applicable central processing date, which rate may vary from the rate Visa itself receives, or the government mandated rate in effect for the applicable central processing date. All transactions in foreign countries will be subject to a 1% conversion or processing fee.
- P. Issuer shall have sole discretion in how payments are applied to cardholder's account. Issuer may accept checks marked "Payment in Full" or with words of similar effect without losing any of Issuer's right to collect the full balance of Cardholder's account.
- Q. Issuer can reinvestigate and reevaluate any information Cardholder provided on Cardholder's credit application at any time, and in the course of doing so, Issuer may ask Cardholder for additional information, request credit bureau reports and/or otherwise verify Cardholder's current credit standing.
- R. Cardholder Agrees that Issuer may re-release information to others, such as credit bureaus, regarding the status and history of Cardholder's account, However, Issuer is not obligated to release any such information to anyone unless Issuer is required by law to do so.
- S. Cardholder agrees that Cardholder's account shall be subject to all applicable rules and regulations of VISA U.S.A. Inc., as applicable, as well as all applicable laws. If there is any conflict between the provisions of this Agreement and the rules and regulations of VISA U.S.A. Inc., shall control. Your Visa Card may not be used for any illegal transactions(s).

# INSURANCE PROTECTION

Yes! Please enroll me in the optional CAP insurance program. I have read and understood the insurance and cost disclosures as described herein. I am under age 71 and I understand that my coverage will terminate at age 71.

Signature

Date of Birth

## Credit Life Insurance

**Credit Account Protector (CAP) helps protect your credit rating and your family** by making your minimum monthly payments up to \$500 if you become involuntarily unemployed, totally disabled, or take an unpaid leave of absence for 30 days or more. It will pay your balance in full, up to \$10,000 if you or your spouse die or suffer dismemberment. Total benefits are limited to the lesser of your outstanding balance as of the date of loss or \$10,000. CAP costs no more than 81¢<sup>1</sup> per \$100 of your balance each month and there's no charge when there's no balance on your account. Interest (except for CA life and disability benefits), premium accrued and charges made after the date of loss are not covered. This insurance is optional and you may cancel at any time. The effective date of coverage is the next statement billing date after receipt and acceptance of your enrollment. If you enroll, carefully read the certificates which we send you. **Enroll now by signing and returning the bottom of your application.**

**Eligibility:** You are eligible for CAP if you are a cardholder, under the age of 71 (age 65 in CA; 66 in DE) and your account is in good standing. The person whose signature appears on the enrollment form is designated as the primary cardholder; only one primary cardholder per account. CAP covers only the primary cardholder for disability, unemployment and family leave. You must be insured at date of loss to qualify for benefits. Benefits are determined as of the date of loss. Coverage stops when you reach age 71 (age 65 in CA; 66 in DE; 72 in NM), or when your account becomes 90 days past due. Spousal benefits are not available in NJ, NY, NC, PA & TX. CAP is not available in VA. CO residents must be currently employed to enroll.

**Unemployment Benefit:** Unemployment must be involuntary and does not cover retirement, resignation, incarceration, periods in which you are paid for work previously done or self-employed people unless the business is closed for financial reasons. You must be gainfully employed at least 30 hours per week at the time of loss, and you must register at your local unemployment office. Benefits are not available in HI, ME, MA, MN, NY, PA & VT. Strike is not covered in IL. In AZ, there is no maximum age limitation for involuntary unemployment insurance.

**Family Leave Benefit:** The unpaid leave of absence must be due to special circumstances (i.e., birth or adoption of a child, accident or illness affecting an immediate family member, a call to active military duty or residence in a federally declared disaster area). You must be employed a minimum of 30 hours per week. Family leave resulting from a pre-existing illness of an immediate family member will not be covered in the first six months. Your coverage must be in force for 90 days before any claims are covered, and each covered claim is limited to six months of benefits. In CA, insurance premiums are reimbursed during family leave claims. Family leave benefits are not available in CT, HI, KS, MA, MD, ME, MN, NH, NM, NY, OR, PA, TX & VT.

**Life, Dismemberment and Disability Benefits:** For CA and TN, CAP pays the balance on the account as of date of death of the primary account holder or the joint account holder up to \$10,000. AL suicide excluded first year. Dismemberment is defined as loss of sight in both eyes or a hand or a foot. Dismemberment is not covered in CA, KS, MN, NJ, RI & WA. Total disability means that due to accidental injury or sickness you are unable to perform the duties of your occupation and you must be attended by a licensed physician other than yourself. Disability benefits for ME & MA residents commence on the 31<sup>st</sup> day of disability. To be eligible for disability coverage, you must be gainfully employed 30 hours per week at the time your claim begins except in CA, GA, ID, IN, ME, MD, MI, MO, NM, OK, TN, TX & WA. Disability benefits are not available in NY & PA. CA residents are not covered for disabilities resulting from normal pregnancy or intentionally self-inflicted injuries and may receive only limited benefits for other disabilities or suicide.

**Monthly Program Costs Per \$100 Balance:** <sup>1</sup> 81¢ in AR, DE, DC, FL, IL, IN, KY, LA, MS, OH, OK, RI, TN, WV; 80¢ in MT, SD; 76¢ in AL, AZ, CA, ID, IA, MI, NV, NC, ND, SC, UT, WY; 72¢ in WI; 71¢ in AK, GA, NJ; 68¢ in NE; 66¢ in MO; 65¢ in KS, WA; 60¢ in MD, OR; 59¢ in NM; 56¢ in CO, NH; 55¢ in CT; 30¢ in MN; 25.3¢ in TX; 22¢ in MA; 19¢ in ME, HI, VT; 10.88¢ in NY; 7¢ in PA. The cost will be charged to your account each month. Premium rates can be increased upon written notice. If you cancel coverage within 30 days after receipt of your certificate, all premiums will be refunded.

**Insurance Providers:** Life, Dismemberment and Disability insurance underwritten by: The United States Life Ins. Co., New York, NY (forms G-19101/19081) in NY; All American Life Ins. Co., Springfield, IL (form GCL275 Series) in CT, NH & VT; American General Assurance Co./USLIFE Credit Life Ins. Co., Schaumburg, IL (form 280 in ME, form 275 in all other states). Involuntary Unemployment and Family Leave insurance underwritten by: American General Indemnity Co./USLIFE Indemnity Co., Omaha, NE (form USI & UIC Series); Montgomery Ward Ins. Co., Schaumburg, IL (form 260 & 264 Series); and Colonial Penn Franklin Ins. Co., Valley Forge, PA (form 360 & 364 Series).

**If you live in NJ, PA or TX, please read the following:** NJ residents may choose life and disability insurance coverage only (20¢ per \$100 balance), and TX residents may choose life & disability insurance coverage only (19.6¢ per \$100 balance). Please write to American General Bancassurance Services Inc., CAP Services, 1000 E. Woodfield Road, Suite 300, Schaumburg, IL 60173 and request a special CAP enrollment form for Equifax Card Services. PA residents: your signature on the enrollment form indicates your request for a special CAP application form as you may not enroll through this offer.

- The insurance product is not insured by the Government or the FDIC;
- The insurance product is not guaranteed by The Exchange Bank of Alabama
- The extension of credit is not conditioned on the purchase of an insurance product.

This disclosure is accurate as of August 17, 2010 and may be subject to change.

This Card may not be used for any illegal practices.

## ALL LINES SUBJECT TO CREDIT APPROVAL BY The Exchange Bank of Alabama.

At the date this application was printed (shown in the lower right-hand corner – this side) the information listed above was accurate.

Because rates and terms are subject to change, you may contact us for the current information at (256)547-2572.

## FOR INTERNAL USE ONLY

ACCOUNT #	APPROVED BY	DATE APPROVED	LIMIT
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The Exchange Bank of Alabama

DBJ 05/12