



**Omaha Douglas
Federal Credit Union**

Individual Account

application

Individual Account

Joint Account

with authorized user

Member Account Number _____

If you are applying for credit in your name only, do not complete portion on co-applicant.

APPLICANT NAME (LAST-FIRST-MIDDLE)				CO-APPLICANT NAME (LAST-FIRST-MIDDLE)			
HOME ADDRESS (STREET & NO.)			HOW LONG?	HOME ADDRESS (STREET & NO.)			HOW LONG?
CITY—STATE—ZIP				CITY—STATE—ZIP			
PREVIOUS HOME ADDRESS			HOW LONG?	PREVIOUS HOME ADDRESS			HOW LONG?
HOME PHONE NO.	BIRTH DATE	NO. OF DEPENDENTS	AGES	HOME PHONE NO.	BIRTH DATE	RELATIONSHIP TO APPLICANT	
SOCIAL SECURITY NO.		DRIVERS LICENSE NO. AND STATE		SOCIAL SECURITY NO.		DRIVERS LICENSE NO. AND STATE	
BUSINESS PHONE NO.	GROSS ANNUAL INCOME	NET MONTHLY PAY		BUSINESS PHONE NO.	GROSS ANNUAL INCOME	NET MONTHLY PAY	
	\$	\$			\$	\$	
EMPLOYER		POSITION	HOW LONG?	EMPLOYER		POSITION	HOW LONG?
BUSINESS ADDRESS				BUSINESS ADDRESS			
PREVIOUS EMPLOYER		POSITION	HOW LONG?	PREVIOUS EMPLOYER		POSITION	HOW LONG?
PREVIOUS BUSINESS ADDRESS				PREVIOUS BUSINESS ADDRESS			

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.

<p>Alimony, child support, separate maintenance received under: court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral understanding <input type="checkbox"/></p> <p>Other income: \$ _____ per _____. Source(s) of other income: _____</p> <p>Is any income listed in this Section likely to be reduced in the next two years? <input type="checkbox"/> Yes (Explain in detail on a separate sheet.) <input type="checkbox"/> No</p>	<p>Alimony, child support, separate maintenance received under: court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral understanding <input type="checkbox"/></p> <p>Other income: \$ _____ per _____. Source(s) of other income: _____</p> <p>Is any income listed in this Section likely to be reduced in the next two years? <input type="checkbox"/> Yes (Explain in detail on a separate sheet.) <input type="checkbox"/> No</p>
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OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary.)

MORTGAGEE OR LANDLORD	PAYMENT ADDRESS		APPROX. MARKET VALUE	ORIGINAL AMOUNT	BALANCE DUE	MO. PMT./RENT
AUTOS OWNED - MAKE	YEAR	LICENSE NUMBER	FINANCED BY	\$	\$	MONTHLY PMT.
				\$	\$	\$
NAME AND ADDRESS (OTHER DEBTS)			ACCOUNT NUMBER	\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
CHECKING/SHARE DRAFT ACCT. NO.	LOCATION	SAVINGS ACCOUNT NOS.		LOCATION	\$ TOTAL	

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU	ADDRESS (CITY-STATE-ZIP)	RELATIONSHIP
Are you a co-maker, endorser, or guarantor on any loan or contract? Yes <input type="checkbox"/> No <input type="checkbox"/>	If "yes" for whom?	To whom?
Are there any unsatisfied judgments against you? Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount \$	If "yes" to whom owed?
Other Obligations — (E.g., liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)		
Have you ever had a car or other personal property repossessed by a dealer or finance company, filed for bankruptcy, or been a party to a wage assignment or collection suit, or have you ever been declined on a loan application to this credit union? <input type="checkbox"/> Yes <input type="checkbox"/> No If your answer to any part of the question is yes, please give details.		
COMPLETE THE FOLLOWING ONLY IF YOU RESIDE IN A COMMUNITY PROPERTY STATE (ARIZONA, CALIFORNIA, IDAHO, LOUISIANA, NEVADA, NEW MEXICO, TEXAS, WASHINGTON OR WISCONSIN); OR IF ANOTHER PERSON WILL BE JOINTLY LIABLE ON THE ACCOUNT. Married <input type="checkbox"/> Separated _____ Unmarried <input type="checkbox"/>		
By affixing my signature to this application I present this information truly and correctly stated to the best of my knowledge and for the purpose of obtaining credit from the Credit Union. I have no other debts. I (or we) hereby apply for a VISA Credit Card. I (or we), have read the attached "VISA Credit Card Agreement" and retained it as my (our) copy. I (we), by signing here, agree to all the terms and conditions of such "VISA Credit Card Agreement." The Credit Union may issue a separate VISA Card embossed with each name signing this application.		

APPLICANT'S SIGNATURE X	DATE	CO-APPLICANT'S SIGNATURE X	DATE
FOR CREDIT UNION USE ONLY	CREDIT LIMIT \$ _____	APPROVED <input type="checkbox"/>	REJECTED <input type="checkbox"/>
VISA ACCOUNT NO. _____			Date _____
COMMENTS/CONDITIONS _____		LOAN OFFICER	

Complete, detach and mail.

OMAHA DOUGLAS FEDERAL CREDIT UNION

CREDIT CARD AGREEMENT



NOTICE: See reverse side for important information regarding your rights to dispute billing errors.

In this Agreement the words you and your mean each and all of those who apply for the card or who sign this Agreement. Card means the VISA Credit Card and any duplicates and renewals we issue. Everyone who receives, signs or uses a card issued under this agreement must be a member of this Credit Union. Account means your VISA Credit Card Line of Credit account with us. We, us and ours means this Credit Union.

1. RESPONSIBILITY. If we issue you a card, you agree to repay all debts and the **FINANCE CHARGE** arising from the use of the card and the card account. For example, you are responsible for charges made by yourself, your spouse and minor children. You are also responsible for charges made by anyone else to whom you give the card, and this responsibility continues until the card is recovered. You cannot disclaim responsibility by notifying us, but we will close the account for new transactions if you so request and return all cards. Your obligation to pay the account balance continues even though an agreement, divorce decree or other court judgment to which we are not a party may direct you or one of the other persons responsible to pay the account. Any person using the card is jointly responsible with you for charges he or she makes, but if that person signs the card he or she becomes a party to this Agreement and is also jointly responsible for all charges on the account, including yours.

2. LOST CARD NOTIFICATION. If you believe the Card has been lost or stolen, you will immediately call 1-614-248-4239 any time or 1-800-448-7587 from 7 a.m. - 9 p.m. week days to report the loss.

3. LIABILITY FOR UNAUTHORIZED USE. You understand that your total liability to the Credit Union shall not exceed \$50.00 for any Card transactions resulting from the loss, theft or other unauthorized use of the Card that occur prior to the time you give notice to the Credit Union.

4. CREDIT LINE. If we approve your application, we will establish a self-replenishing Line of Credit for you and notify you of its amount when we issue the card. You agree not to let the account balance exceed this approved Credit Line. Each payment you make on the account will restore your Credit Line by the amount of the payment which is applied to principal. You may request an increase in your Credit Line only by written application to us, which must be approved by our credit committee or loan officer. By giving you a 15 day written notice the credit union may reduce your Credit Line from time to time, or with good cause, revoke your card and terminate this Agreement. Good cause includes your failure to comply with this Agreement, or our adverse reevaluation of your credit-worthiness. You may also terminate this Agreement at any time, but termination by either of us does not affect your obligation to pay the account balance. The cards remain our property and you must recover and surrender to us all cards upon our request and upon termination of this Agreement.

5. CREDIT INFORMATION. You authorize us to investigate your credit standing when opening, renewing or reviewing your account, and you authorize us to disclose information regarding your account to credit bureaus and other creditors who inquire of us about your credit standing, to the extent authorized in our By-Laws.

6. MONTHLY PAYMENT. We will mail you a statement every month showing your Previous Balances of purchases and cash advances, the current transactions on your account, the remaining credit available under your Credit Line, the New Balance, Balances of Purchases and Cash Advances, the total New Balance, the **FINANCE CHARGE**, Due Date, and the Minimum Payment required. Every month you must pay at least the Minimum Payment within 25 days of your statement closing date. You may, of course, pay more frequently, pay more than the Minimum Payment, or pay the Total New Balance in full, and you will reduce the **FINANCE CHARGE** by doing so. The Minimum Payment will be either (a) 3% of your Total New Balance, or \$20 whichever is greater, or (b) your Total New Balance, if it is less than \$20 plus (c) any portion of the Minimum Payment(s) shown on prior statement(s) which remains unpaid. In addition, each time your Total New Balance exceeds your Credit Line, you will be charged a fee of \$10.00 and you must immediately pay the excess upon our demand. We will apply your payments first to previously billed and unpaid **FINANCE CHARGE** on purchases; then to previously billed purchases, then to cash advances; and then to new purchases, whether or not billed on the monthly statement. However, any payment equal to, or greater than, the Previous Balance of Purchases will be applied first to that balance and any **FINANCE CHARGE** thereon so as to avoid continuing accrual of **FINANCE CHARGE** on that amount.

7. FINANCE CHARGES. You can avoid **FINANCE CHARGE** on purchases by paying the full amount of the New Balance of Purchases each month within 25 days of your statement closing

date. Otherwise, the New Balance of Purchases, and subsequent purchases from date they are posted to your account, will be subject to **FINANCE CHARGE**. Cash advances are always subject to **FINANCE CHARGE** from the date they are posted to your account. **FINANCE CHARGE** (interest) is calculated at the periodic rate of **1.075% per month (ANNUAL PERCENTAGE RATE OF 12.9%)**, on the average daily principal balances of purchases and cash advances in the account. The principal balances are determined each day during the statement period, beginning with the principal portion of your Previous Balances, reduced by payments you make and credits we apply, and increased by purchases and cash advances you make and debit adjustments we make during the statement period. The daily principal balances are totalled, and divided by the number of days in the statement period, to produce separate average daily principal balances for purchases and cash advances to which the periodic rate is then applied.

8. OTHER CHARGES. Your account will be subject to other charges including without limitation: Over-limit fee \$10.00, Late fee \$15.00.

9. DEFAULT. You will be in default if you fail to make any Minimum Payment within 25 days after your monthly statement closing date. You will also be in default if your ability to repay us is materially reduced by a change in your employment, an increase in your obligations, bankruptcy, or insolvency proceedings involving you, your death or your failure to abide by this Agreement, or if the value of our security interest materially declines. We have the right to demand immediate payment of your full account balance if you default, subject to our giving you any notice required by law. To the extent permitted by law, you will also be required to pay our collection expenses, including court costs and reasonable attorney's fees.

10. USING THE CARD. To make a purchase or cash advance, there are two alternative procedures to be followed. One is for you to present the card to a participating VISA plan merchant, to us or to another financial institution, and sign the sales or cash advance draft which will be imprinted with your card. The other is to complete the transaction by using your Personal Identification Number (PIN) in conjunction with the card in an Automated Teller Machine or other type of electronic terminal that provides access to the VISA system. The monthly statement will identify the merchant, electronic terminal or financial institution at which transactions were made, but sales, cash advance, credit or other slips cannot be returned with the statement. You will retain the copy of such slips furnished at the time of the transaction in order to verify the monthly statement. The Credit Union may make a reasonable charge for photocopies of slips you may request.

11. RETURNS AND ADJUSTMENTS. Merchants and others who honor the Card may give credit for returns or adjustments, and they will do so by sending us a credit slip which we will post to your account. If your credits and payments exceed what you owe us, we will hold and apply this credit balance against future purchases and cash advances, or if it is \$1 or more, refund it on your written request or automatically after 6 months.

12. FOREIGN TRANSACTIONS. Purchases and cash advances made in foreign countries and foreign currencies will be billed to you in U. S. Dollars. The conversion rate to dollars will be made in accordance with the operating regulations for international transactions established by VISA International, Inc.

13. PLAN MERCHANT DISPUTES. We are not responsible for the refusal of any plan merchant or financial institution to honor your card. We are subject to claims and defenses (other than tort claims) arising out of goods or services you purchase with the card only if you have made a good faith attempt, but have been unable to obtain satisfaction from the plan merchant, and (a) your purchase was made in response to an advertisement we sent or participated in sending you; or (b) your purchase cost more than \$50 and was made from a plan merchant in your state or within 100 miles of your home. Any other disputes you must resolve directly with the plan merchant.

14. CREDIT UNION MEMBERSHIP. The holder of the Card agrees to maintain an active Membership with the Credit Union and maintain a Primary Share (Savings) balance equal to or greater than the Par Value of one (1) Share. Par Value being \$5.00. In the event that the Share Balance drops below the Par Value, the Credit Union reserves the right to initiate a cash advance on your Card Line of Credit to bring the Share Balance up to Par.

15. SECURITY INTEREST. You pledge to us and grant us a security interest in any shareholdings with us to secure your VISA Account. You authorize us to apply these shareholdings to pay any amounts due on the account or under this agreement if you should default.

(continued on back)

Detach and save for your records.

16. EFFECT OF AGREEMENT. This Agreement is the contract which applies to all transactions on your account even though the sales, cash advance, credit or other slips you sign or receive may contain different terms. We may amend this Agreement from time to time by sending you

the advance written notice required by law. Your use of the card thereafter will indicate your agreement to the amendments. To the extent the law permits, and we indicate in our notice, amendments will apply to your existing account balance as well as to future transactions.

YOUR BILLING RIGHTS

Keep This Notice for Future Use

This notice contains important information about your rights and our responsibilities under the Fair Credit Billing Act.

Notify Us in Case of Errors or Questions About Your Bill

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at the address listed on your bill. Write to us as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are not sure about.

If you have authorized us to pay your credit card bill automatically from your savings or checking (share draft) account, you can stop the payment on any amount you think is wrong. To stop the payment your letter must reach us three business days before the automatic payment is scheduled to occur.

Your Rights and Our Responsibilities After We Receive Your Written Notice

We must acknowledge your letter within 30 days, unless we have corrected the error by then. Within 90 days, we must either correct the error or explain why we believe the bill was correct.

After we receive your letter, we cannot try to collect any amount you question, or report you as delinquent. We can continue to bill you for the amount you question, including finance charges, and we can apply any unpaid amount against your credit limit. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your bill that are not in question.

If we find that we made a mistake on your bill, you will not have to pay any finance charges related to any questioned amount. If we didn't make a mistake, you may have to pay finance charges and you will have to make up any missed payments on the questioned amount. In either case, we will send you a statement of the amount you owe and the date that it is due.

If you fail to pay the amount that we think you owe, we may report you as delinquent. However, if our explanation does not satisfy you and you write to us within ten days telling us that you still refuse to pay, we must tell anyone we report you to that you have a question about your bill. And, we must tell you the name of anyone we reported you to. We must tell anyone we report you to that the matter has been settled between us when it finally is.

If we don't follow these rules, we can't collect the first \$50 of the questioned amount, even if your bill was correct.

Special Rule for Credit Card Purchases

If you have a problem with the quality of property or services that you have purchased with a 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 property or services. There are two limitations on this right:

- (a) You must have made the purchases in your home state or if not within your home state, within 100 miles of your current mailing address; and
- (b) The purchase price must have been more than \$50.

These limitations do not apply if we own or operate the merchant, or if we mailed you the advertisement for the property or services.

OMAHA DOUGLAS FEDERAL CREDIT UNION

There are major differences in credit card costs. You have the right to be informed to compare. You are right to compare.	
Credit Card Information (revised 5-12)	Omaha Douglas VISA Credit Card
Annual Percentage Rate (APR) for Purchases	10.90%APR
Other APRs	Cash Advance APR: 12.90% Default rate: 12.90%*
Grace period for repayment of the balance owed for purchases	25 days
Method of computing the Balance for Purchases:	Average daily balance including new purchases.
Annual Fee	NONE
Transaction fee for purchases	NONE
Transaction fee for cash advances	NONE
Late payment Fee	\$15.00
NSF Fee	\$10.00
Over-limit fee	\$10.00
Replacement Card	\$5.00

*Your APR may increase if your account is more than 60 days past due.

Your card provider should give you the information you need to compare by phone, or call us at Omaha Douglas Federal Credit Union

So, why pay more for the very same world wide convenience and accepted credit?

Go ahead and transfer your current card balances to your new Omaha Douglas Federal Credit Union VISA. You'll automatically start saving more on your finance charges by transferring any balance to our lower-interest card. Bring in your other credit card statement(s) and we'll handle it for you.

Whether you use your card for credit or for convenience, your Omaha Douglas Federal Credit Union VISA is the most widely accepted credit card in the world. No matter where you are, you have access to your credit limit — for cash, for all types of purchases, for emergencies. Safer than carrying cash, having an Omaha Douglas Federal Credit Union VISA is another smart way to manage your money.

The information about the cost of the card described in this application is accurate as of May 2012. This information may have changed after that date. To find out what may have changed, call us at 1-402-444-5999 or write us at Omaha Douglas Federal Credit Union, 8251 W. Center Rd., Omaha, NE 68124.