

SOS APPLICATION

Applicant

Checking Acct. No: _____ Type of Acct: _____ Joint: _____ Individual: _____ Amount of Credit Line: _____

Last Name: _____ First: _____ M.I.: _____ Birthdate: _____ Social Security No: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone No: _____ How Long At Address: _____ Own: _____ Rent: _____ Monthly Payment: _____

Present Employer: _____ Date From-To: _____ Gross Mo. Salary: _____

Address: _____ Position: _____ Business Phone: _____

Nearest Relative Not Living With You: _____ Address: _____ Relationship: _____

Other Income: _____ Source: _____ Amount: _____

Co-Applicant

Last Name: _____ First: _____ M.I.: _____ Birthdate: _____ Social Security No: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone No: _____ How Long At Address: _____ Own: _____ Rent: _____ Monthly Payment: _____

Present Employer: _____ Date From-To: _____ Gross Mo. Salary: _____

Address: _____ Position: _____ Business Phone: _____

Nearest Relative Not Living With You: _____ Address: _____ Relationship: _____

Other Income: _____ Source: _____ Amount: _____

Credit Information

Checking Acct. No: _____ Bank Name: _____ Address: _____ Balance: _____

Savings Acct. No: _____ Bank Name: _____ Address: _____ Balance: _____

Other Deposit Accts: _____ Bank Name: _____ Address: _____ Balance: _____

Stock/Mutual Funds: _____ Balance: _____

Account No: _____ Finance Co: _____ Address: _____ Value: _____ Mo. Pymt: _____

Mortgage Loan: _____

Auto Loan: _____

Credit Card: _____

Credit Card: _____

Credit Card: _____

Other: _____

COMPLETE ALL AMOUNTS OWING (BANKS, STORES, CREDIT UNIONS, FINANCE CO., ETC.)-ATTACH ADDITIONAL SHEET IF NECESSARY.

Applicant's Signature(s) Both must sign if joint account:

I (we) certify that the above information is true and complete. I (we) agree that inquiries may be made to verify the information and that credit references or verification may be given based on inquiries from other parties. If requested by me (us), the name and address of the consumer reporting agency that furnished credit information will be disclosed. If an update, renewal, or extension of my (our) line of credit is under review by the bank, a new credit report may be requested without notice to be disclosed. I understand that I must update credit information at your request if my financial condition change.

OVERDRAFT PROTECTION AUTHORIZATION: Please pay any check or order properly drawn on my (our) checking account to the extent of any available credit on our S.O.S. account. I (we) agree to be bound to the S.O.S. Agreement and Disclosure Statement terms set forth therein. I (we) agree to pay the minimum monthly principal amount of all S.O.S. in use at 1/20 of the principal balance as shown on the statement or \$20.00, whichever is greater (or such lesser amount as shall pay my indebtedness in full). Interest shall accrue on the average daily unpaid balances of all outstanding S.O.S. in use at the rate of 1.075% per month. The annual percentage rate is 15.9%.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

Interest Rate and Interest Charges

Annual Percentage Rate (APR) for Cash Advances	15.900%
Paying Interest	You will be charged interest from the transaction date.

Fees

Annual Fees	\$25.00
Penalty Fees -Late Payment	5.000% of the unpaid amount of the payment.

How We Will Calculate Your Balance: We use a method call the "daily balance (including current transactions)." See your account agreement for more details.

Billing Rights. Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

Security Bank

*Loan Center
300 South Grand West
Springfield, Illinois 62704
217/789-3500
Fax 217/789-3510*

AUTHORIZATION FORM

I hereby authorize **Security Bank, SB**, the “Lender” to verify my past and present employment earnings records, bank accounts, stock holdings and any other asset balances that are needed to process my loan application. I further authorize **Security Bank, SB** (the lender) to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references and in addition **Security Bank, SB** may order a payoff statement. It is further understood that this authorization may be used for quality control review. It is understood that a photocopy of this form will serve as authorization.

I/We further authorize **Security Bank, SB** to provide any and all information contained in the loan application to the credit bureau in order to facilitate the reporting of credit information to **Security Bank, SB**.

The information the lender obtains is only to be used in the processing of my application for a loan.

Dated: _____
