



2020 Christmas Loan

Date: _____ Member Number: _____ Loan Number: _____

Borrower's Name: _____ SSN: _____ Date of Birth: _____

Address: _____ City/State/Zip Code: _____

Home Phone: _____ Work Phone: _____

Employer: _____ Date Started: _____

Employer's Address: _____ Monthly Income (Gross): _____

Reference (Other than spouse): _____ Address: _____ Phone: _____

Home: Own Rent Monthly Payment: \$ _____

If you are applying with another person, complete the co-borrower information.

Co-Borrower's Name: _____ SSN: _____ Date of Birth: _____

Employer: _____ Monthly Income (Gross): _____

Amount you wish to borrow:

\$1,000 \$2,000

Purpose of loan: Christmas

I wish to add Life & Disability Insurance:

Yes No

Single coverage Joint coverage

You may be eligible for disability insurance only if you are working for wages for 24 hours per week or more on the date of the loan.

Any Life & Disability Insurance for which a charge or premium is included as part of Debtor's obligation IS NOT REQUIRED BY SECURED PARTY. The debtor, however, may voluntarily accept this coverage.

Loan approval is not contingent on the purchase of insurance.

If approved, deposit the funds into my:

Savings Account

Checking Account

Mail Check

I would like to make payments by:

Payroll Deduction

Cash/Check

Automatic Transfer From:

Savings Account

Checking Account

You may cancel your automatic payment request in writing to: Citizens Community Credit Union, 2012 1st Ave S, Fort Dodge, IA 50501

I/We hereby certify that all statements made are true and complete, are submitted for the purpose of obtaining credit and that the Credit Union may rely on them for such determination. I/We authorize you to obtain such information as you may require concerning the statements made in this loan application.

I authorize the Credit Union to obtain additional information concerning my debts from a credit report and hereby acknowledge my credit report to represent my current financial situation. By signing here, I am applying for a 2020 Christmas Loan and agree to repay the loan with interest (FINANCE CHARGE) according to the terms stated on all pages of this Application Note, if my application is approved by the Credit Union.

X _____
Borrower's Signature Date

X _____
Co-Borrower's Signature Date

Please return completed loan application to your local Citizens office:

Main Office: 2012 1st Ave S, Fort Dodge, IA 50501 • (515) 955-5524

Hy-Vee: 115 S 29th St, Fort Dodge, IA 50501 • (515) 955-7787

Algona: 403 E Call St, Algona, IA 50511 • (515) 295-7121

Belmond: 247 E Main St, Suite B, Belmond, IA 50421 • (641) 444-3388

Estherville: 2 N 2nd St, Estherville, IA 51334 • (712) 362-7751

Lake Mills: 106 S Mill St, Lake Mills, IA 50450 • (641) 592-0900

Spirit Lake: 1805 18th St, Spirit Lake, IA 51360 • (712) 336-1095

Storm Lake: 609 Flindt Dr, Storm Lake, IA 50588 • (712) 732-5400

Credit Union Use Only

Date: _____

Action: _____

TRUTH IN LENDING DISCLOSURES

\$1,000.00	<input type="checkbox"/> Without Insurance	<input type="checkbox"/> With Life & Disability Insurance
ANNUAL PERCENTAGE RATE (The cost of credit as a yearly rate)	3.99%	3.99%
TOTAL FINANCE CHARGE* (The dollar amount the credit will cost you)	\$23.18	\$23.32
AMOUNT FINANCED (The amount of credit provided to you or on your behalf)	\$1,000	\$1,000
Total of Payments* (The amount you will have paid after you made all payments as scheduled)	\$1,023.18	\$1,035.73
Single Life & Disability Insurance¹	N/A	\$12.41
Monthly Payments* (12 months starting _____)	\$86.00	\$87.00
Final Payment*	\$77.18	\$78.73
\$2,000.00	<input type="checkbox"/> Without Insurance	<input type="checkbox"/> With Life & Disability Insurance
ANNUAL PERCENTAGE RATE (The cost of credit as a yearly rate)	3.99%	3.99%
TOTAL FINANCE CHARGE* (The dollar amount the credit will cost you)	\$46.60	\$46.87
AMOUNT FINANCED (The amount of credit provided to you or on your behalf)	\$2,000	\$2,000
Total of Payments* (The amount you will have paid after you made all payments as scheduled)	\$2,046.60	\$2,071.85
Single Life & Disability Insurance¹	N/A	\$24.98
Monthly Payments* (12 months starting _____)	\$171.00	\$173.00
Final Payment*	\$165.60	\$168.85
\$	<input type="checkbox"/> Without Insurance	<input type="checkbox"/> With Life & Disability Insurance
ANNUAL PERCENTAGE RATE (The cost of credit as a yearly rate)		
TOTAL FINANCE CHARGE* (The dollar amount the credit will cost you)		
AMOUNT FINANCED (The amount of credit provided to you or on your behalf)		
Total of Payments* (The amount you will have paid after you made all payments as scheduled)		
Disability Insurance¹ ___ Single coverage ___ Joint coverage		
Monthly Payments* (12 months starting _____)		
Final Payment*		

* Asterisk (*) means estimate. Your final payment on the loan may vary.

¹ Life & Disability Insurance are not required to obtain credit and will not be provided unless you sign and agree to pay the additional cost.

You promise to pay the Credit Union the principal amount, plus interest on the unpaid balance, according to the payment schedule and rate listed in the "Truth In Lending Disclosure". The rest of the terms and conditions of the Note are listed herein. You also pledge your accounts in the Credit Union in accordance with the "Pledge of Savings".

PRE-PAYMENT: You can repay all or any part of this loan, at any time without penalty.

LATE CHARGES: If a payment is not paid in full within 10 days after it is due, you will be charged \$15.00 or 5% of that payment, whichever is less.

DEFAULT: You are in default if you fail to make your loan payment on time. You are also in default under this NOTE if you are in default under any other security agreement with the Credit Union.

ACCELERATION: If you are in default, any part of this loan then unpaid and any other amounts you owe under other security agreements are due and payable in full with a notice of cure, at the Credit Union's option.

NOTICE OF NEGATIVE INFORMATION: We may report information about your account to credit bureaus. Late payments, missed payments or other defaults on your account may be reflected in your credit report.

COMPLETING NOTE: You authorize the Credit Union to complete this NOTE in any necessary respect if it is executed while incomplete, advancing you with a corrected copy.

PLEDGE OF SAVINGS: As security for all amounts owing under this note you grant a security interest in your shares and/or deposits you now have or in the future have in the Credit Union. If you default, you authorize the Credit Union to apply such charges or deposits to your account. Regardless of this pledge, if payments on this loan and other loans with the Credit Union are up-to-date, borrower(s) can withdraw shares and/or deposits. Collateral securing other loans with the Credit Union also secures this loan.

REQUIRED DEPOSIT: The Annual Percentage Rate does not take into account your required deposit.

Finance charge may vary with loan date, and the date that payments are made. Your last payment may be more or less than previous payments. Approval is subject to our normal credit standards and criteria, and your application must be received by the close of business on December 24, 2020 to qualify for this special loan rate(s). Offer subject to change without notice.