



Thank you for your interest in obtaining a loan with Farmers State Bank!

Small Loan Notice

Before you complete a Loan Application, please be aware Loan Applicants must have a satisfactory deposit account with Farmers State Bank for a minimum of three months in order to be eligible to apply for small loans of \$3,000 or less.

If you're interested in opening a deposit account in order to become eligible for our small loan services in the future, please ask to see our Customer Service Representative.

Information regarding Identification Requirements

If you are not currently an FSB Customer:

Regulations require us to obtain two forms of Identification from you prior to opening a deposit or loan account. One of the forms must be a picture ID – for example, a Driver's License, State-Issued ID Card, or Passport.

In addition, the address that you wish to use on your new deposit or loan account must correspond to the address indicated on your picture ID. If it does not match, there are a couple of options available to you:

- 1. You can obtain a new picture ID that has the correct address on it; or
- You can provide us with a utility bill in your name indicating an address that corresponds to what you wish to use on your account.

We hope that these requirements do not cause you any inconvenience – they were created in order to prevent identity fraud. If you have any questions, please let us know.

We would appreciate the opportunity to earn your business – thank you!





Equal Credit Opportunity Act Notice

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, marital status, age (provided that the applicant has the capacity to enter into a binding contract), sex, handicap or familial status (having children under the age of 18), because all or part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with the law concerning this lender is the

Federal Reserve Consumer Help P.O. Box 1200 Minneapolis, MN 55480

We are required to disclose to you that you need not disclose income from alimony, child support or separate maintenance payments if you choose not to do so.

Having made this disclosure to you, we are permitted to inquire if any of the income shown on your application is derived from such a source and to consider the likelihood of consistent payment as we do with any income on which you are relying to qualify for the loan for which you are applying.

Main Bank P O Box 610 1100 Main Street Quinton, OK 74561 (918) 469-3337 Fax: (918) 469-3388 Red Oak Branch P O Box 370 104 SE 2nd Street Red Oak, OK 74563 (918) 754-2215 Fax: (918) 754-2987 Haskell County Branch P O Box 599 1700 East Main Street Stigler, OK 74462 (918) 967-1025 Fax: (918) 967-8238 Eufaula Branch

P O Box 669 520 South Main Street Eufaula, OK 74432 (918) 618-9520 Fax: (918) 618-9529

PERSONAL LOAN APPLICATION

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

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 opens an account.

What this means for you: When you 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. INFORMATION ABOUT CREDIT REQUEST **Please Check Appropriate Box** If you are applying for individual credit or an individual account, in your own name, and are relying on your own income or a ssets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections A-D. If the requested credit or account is to be secured, also complete the first part of Section F If you are applying for joint credit with another person or for a joint account or an account that you and another person will use, complete all Sections, providing information in Section E about the joint applicant. We intend to apply for joint credit: Applicant Co-Applicant If you are applying for individual credit or an individual account, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections to the extent possible, providing information in Section E about the person on whose alimony, support, or maintenance payments or income or assets you are relying. REQUESTED MOS. TO PAY AMOUNT OF LOAN REQUESTED PURPOSE OF LOAN COLLATERAL OFFERED AND HOW OWNED HAVE YOU EVER APPLIED TO US FOR A LOAN? WHEN? □ NO □ YES SECTION A - APPLICANT NAME (Please print full name) SOCIAL SECURITY NUMBER HOME PHONE CELL PHONE BIRTH DATE PRESENT STREET ADDRESS YEARS THERE DRIVERS LICENSE NUMBER - STATE CITY AND STATE ZIF E-MAIL ADDRESS IMMEDIATE PREVIOUS ADDRESS YEARS THERE NO. OF DEPENDENTS - LIST BY AGE CITY AND STATE ZIP ARE YOU A U.S. CITIZEN? Yes 🗆 No TWO NEAREST RELATIVES NOT LIVING WITH YOU OTHER THAN A PRESENT OR FORMER SPOUS ADDRESS NAME CITY, STATE ZIP PHONE 1. 2. MY PRINCIPAL FINANCIAL INSTITUTION IS: Checking Account No. Savings Account No. Cert. of Deposit Safe Deposit Loan OTHER FINANCIAL INSTITUTIONS USED Savings Account No. Safe Deposit Checking Account No. Cert. of Deposit Loan SECTION B - INCOME AND EMPLOYMENT PRESENT EMPLOYER SALARY AND WAGES Monthly Income OTHER INCOME: From Whom or Describe: Alimony, child support, or separate maintena not be revealed if you do not wish to have it considered as a basis for repaying this obligat EMPLOYER ADDRESS BUSINESS PHONE nce inco DATE OF EMPLOY \$ POSITION OR TITLE SUPERVISOR \$ PREVIOUS EMPLOYER AND ADDRESS \$ \$ POSITION OR TITLE YEARS EMPLOYED TOTAL MONTHLY INCOME \$ Is any income listed in this Section likely to be reduced in the next two years or before the credit requested is paid off? 🗆 No Yes (Explain in detail, use separate sheet if needed): If you have chosen to disclose income from alimony, child support or separate maintenance, is such income pursuant to: Written Agreement Court Decree Other HOW LONG RECEIVED? HOW OFTEN? FROM WHOM? □ NO □ YES - WHEN? Have you ever been bankrupt or had any judgments or garnishments against you? Are you a co-maker, endorser, or guarantor on any loan or contract? □ NO □ YES TO WHOM? AMOUNT? FOR WHOM? **SECTION C – ASSETS** (Use Additional Sheet If Needed) VALUE OF ASSET AMOUNT OF DEBT DESCRIPTION OF ASSET (Include Account Number, if applicable) NAME OF OWNER(S) S s \$ \$

s

\$

TOTAL ASSETS FROM ADDITIONAL SHEET

TOTAL ASSETS

\$

\$

SECTION D – LIABILITIES AND INDEBTEDNESS

List below all indebtedness to banks, cred	lit unions, st				dividuals			s, incl	uding obligati	ons to pa	y alimony, child support,	
separate maintenance, rent, mortgages, etc CREDITOR	CREDITOR TYPE OF DEBT OR			ORIGINAL DEBT			PRESENT A		T COLLA	ATERAL	MONTHLY PAYMENT	
		ACCOUNT N	UMBER	\$			OWE \$	D			\$	
				\$			\$				\$	
				\$			\$				\$	
				\$			\$				\$	
				\$			\$				\$	
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TOTAL LIABILITIES FROM ADDITIONAL SHEET							\$ LIABILITIES				\$ MONTHLY PAYMENTS	
	TOTALS						\$				\$	
1	SECTION				NT, US Sheet If			R PA	ARTY			
NAME (Please print full name)		HOME PH	IONE		CELL PHONE			BIRTH DATE SOCIAL SECURITY NUMBER				
PRESENT STREET ADDRESS					YEARS THERE:			DRIVERS LICENSE NUMBER - STATE				
CITY AND STATE					ZIP			E-MAIL ADDRESS				
IMMEDIATE PREVIOUS ADDRESS					YEARS TH		NO. OF DEPENDENTS - I			LIST BY AGE		
CITY AND STATE					ZIP			ARE YOU A U.S. CITIZEN?				
RELATIONSHIP TO APPLICANT					CO-APPLICANT			SIGNER GUARANTOR ENDORSER				
TWO NEAREST RELATIVES NOT LIVING WITH YO NAME	OU OTHER THA	AN A PRESEN ADDRESS	Γ OR FOR	MER SPO	DUSE		CITY, STAT	e zip			PHONE	
1. 2. MY PRINCIPAL FINANCIAL INSTITUTION IS: CI	necking Account	No	avings Acc	count No	l	Cert. of D	enosit	s	afe Deposit		Loan	
					*		-	Safe Deposit			Loan	
PRESENT EMPLOYER	icenting i feeduari	Savings Accol					RY AND WAGES		and Deposit	Mor	athly Income	
EMPLOYER ADDRESS		F	USINESS	PHONE				m Whor	n or Describe: Ali i	\$	upport, or separate maintenance	
LIM LOTER ADDRESS		L	CONTESS	THORE			need not be reve				dered as a basis for repaying this	
DATE OF EMPLOY						\$						
POSITION OR TITLE SUPERVISOR							\$					
PREVIOUS EMPLOYER AND ADDRESS										\$		
										\$		
POSITION OR TITLE			EARS EM]	FOTAL N NCOME	IONTHLY			\$		
Is any income listed in this Section likely to be reduced	in the next two y	ears or before t	he credit re	quested is	paid off?		□ No	□ Ye	s (Explain in detai	l, use separat	e sheet if needed):	
If you have chosen to disclose income from alimony, ch	ild support or ser	arate maintena	nce, is such	income p	oursuant to:	HOW	LONG RECEIV	ED?	HOW OFTEN?	FROM V	VHOM?	
□ Written Agreement □ Court Decree	□ Other											
Have you ever been bankrupt or had any judgments or garnishments against you? \square NO \square YES - WHEN?												
Are you a co-maker, endorser, or guarantor on any loan or contract? NO VES FOR WHOM? TO WHOM? AMOUNT? SECTION F – MARITAL STATUS												
Complete this Section ONLY if the loan requeste	d is to be secure							property	v located in a com	munit v pror	erty state to renay the loan	
APPLICANT: Married Separated Unmarried											le, divorced and widowed)	
		,			TURE				(-			
Everything that I have stated in this applicatio	n is correct to	the best of m					vill retain this	applica	ution whether or	not loan is	approved. You are	
authorized to check my credit and employment												
APPLICANT SIGNATURE					C	D-APPLIC	CANT/CO-SIG	NER/GU	ARANTOR/END	ORSER SIGN	IATURE (Where Applicable)	
x x												
DATE DATE												
	Μ	ORTGAG	E LOAN	N ORIO	GINATO	R INF	ORMATIO	N				
THIS INFORMATION APPLIES TO CONSUMER	LOANS SECUR					EEQUITY	Y LINE OF CRE					
Loan Originator's Name Loan Originator Identifier								Loan	Originator's l	'hone Nun	ber (including area code)	
Loan Origination Company's Name		Loan Origination Company Identi						Loan Origination Company's Address				





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. 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.

Consumer

Date

Consumer

Date