### VISA<sub>®</sub> Business Credit Card



### **Controlled Spending**

Manage your company's cash flow conveniently and efficiently with a VISA® Business Card. Its flexibility allows you to preset spending limits for each employee cardholder. Online account information helps you monitor available funds 24/7. Detailed monthly statements and reports itemize your business expenditures to help you track expenses and prepare for tax season.

#### **Secure Transactions**

Fraud monitoring helps detect suspicious activity early. Visa® Zero Liability protects against unauthorized card use and grants provisional credit.

### **Worldwide Acceptance**

The Visa® Business Card gives you international buying power. Use it everywhere Visa® is accepted. Purchase office equipment, order supplies online or dine with clients.

### **Premium Services\***

Protect your business with the following Visa® Business Card services:

- Purchase security
- Extended warranty protection
- Auto rental insurance
- Travel and emergency services
- Travel accident insurance up to \$150,000
- AutoPay program
- Online access at mycardstatement.com
- Visa® Zero Liability
- Visa® Liability Waiver

\*Certain restrictions and limitations apply. See the Visa Business Benefits Package for complete details.



Check YES on application to enroll in Check YES on application to enroll in ScoreCard Rewards and earn one point for ScoreCard Rewards and earn one point in ScoreCard Rewards and earn one point for ScoreCard Rewards and earn one point ScoreCard Rewards and earn one point ScoreCard Rewards and earn one point ScoreCard Rewards and ScoreCard Rewards and ScoreCard Rewards ScoreCard

- Please print **ALL PAGES** of this document.
- Each applicant should complete the application and sign.
- The signed application should be mailed to: Bankers' Bank of Kansas Service Center P.O. Box 20810
   Wichita, KS 67208-6810
- **OR**, use the prepaid business reply envelope. Please follow the supplied directions to prevent papers from separating during transit. Remember to tape the business reply envelope closed.
- Applicant should keep the Important Disclosures for the rates, fees or terms associated with this program.
- Applicant should keep this page as an overview.

### **KEEP THIS PAGE.**Include it when mailing your application.



# **VISA**. Business Card Application



Credit limit requested: \$	☐ Check to opt in for Business ScoreCard Rewards				F	NANCIAL
Name of business as you would like it to appear on card (Limit 24 spaces)  Check business type (only one) and submit items listed    Corporation	•					
Check business type (only one) and submit items listed   Corporation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Corporation						
Corporation	Check business type (only one) and	d submit items	listed			
Letter of reference from your bank Full year financials				ship	☐ Non	-profit or Government
Business Address	Letter of reference from your bankLetter of refe		Letter of refe	rence from your bank ncials	Full Fina	year financials ance committee minutes
hone Number	usiness Name			Tax ID#		
Prone Number	Business Address		City	State		Zip Code
Nature of Business						
Sexue Business Credit Cards to the Following Individual Applicants    Individual Credit Line Requested						
Signature   Individual Credit Line Requested						
Signature Individual Credit Line Requested  X				11003110		
X	ssue Business Credit Cards to the	Following Indi	vidual Applica	nts		
X	Jame (please print)	Signature			Individual Cred	it Line Requested
X \$		Χ			\$	
Credit Information  Bank Name	2	Χ			\$	
Address	3	X			\$	
Address	uttach additional sheet if necessary (with signature and credit line request	ted).				
State Zip Code Bank Phone Number	Credit Information					
Avg. Acct. Balance YTD						
Avg. Acct. Balance YTD	•			Bank F	Phone Number_	
Authorizing Officer's Information  Position with Business (check one)						
Authorizing Officer's Information  Position with Business (check one)		A	vg. Acct. Balance Y ID _			
Position with Business (check one)	Taue Referrées					
Position with Business (check one)	Authorizing Officer's Information					
First Name         # Years with Business           Home Address         City         State         Zip Code           Date of Birth         Social Security #         Home Phone #		nt □ VP □ Treas	surer $\square$ Owner	☐ Partner	☐ Member	☐ Other
Home Address         City         State         Zip Code            Date of Birth         Social Security #         Home Phone #	, ,		_		_	<del>_</del>
Date of Birth	Home Address	City		State	Zip Cod	e
	Date of Birth Social	Security#			Home F	Phone #
	Dudiness account balances are due and payable in	ian each month apon	receipt of credit cald	otatement.		
Business account balances are due and payable in full each month upon receipt of credit card statement.	AUTOMATIC PAYMENT OPTION: If you would like you	our payment automatically deduct	ed from your checking or saving	gs account, please check her	e and an automatic pa	ayment set-up form will be mailed to you
			•			
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to you please READ CAREFULLY BEFORE SIGNING: This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be a submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be a submitted to obtain credit.	,				•	
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to you please READ CAREFULLY BEFORE SIGNING: This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, W	credit is granted. Receipt of such agreement and acceptance of such terms to be	pe conclusively presumed by busin	ness' use. If this is a joint busines	s application, the undersigned	d shall be jointly and se	
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to your please READ CAREFULLY BEFORE SIGNING: This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, W.KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the Business Card Agreement, a copy of which will be mailed to the business application. Receipt of such agreement and acceptance of such terms to be conclusively presumed by business' use. If this is a joint business application, the undersigned shall be jointly and severally liable for any and all credit exten						closures
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to you please. If you would like your payment set-up form will be mailed to you please. If you would like your payment set-up form will be mailed to you please. If you agree and grant permission that inquiries may be to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, W.KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the Business Card Agreement, a copy of which will be mailed to the business applicated to granted. Receipt of such agreement and acceptance of such terms to be conclusively presumed by business' use. If this is a joint business application, the undersigned shall be jointly and severally liable for any and all credit extention time to time. I/We hereby certify and warrant that the statements made by me /us in this certificate are true and correct and that I /we have read the Important Disclosures in this application.	,	•.	riai internet Gambling Ent	ordenient Act of 2006 at	s stated III (Ne DIS	
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to you please the part of the par	,					who helped you:
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to your please the payment set on the parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, W KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the Business Card Agreement, a copy of which will be mailed to the business application, the undersigned shall be jointly and severally liable for any and all credit extendrom time to time. I/We hereby certify and warrant that the statements made by me /us in this certificate are true and correct and that I /we have read the Important Disclosures in this application.  I/We certify that this business does not engage in Internet gambling pursuant to the Unlawful Internet Gambling Enforcement Act of 2006 as stated in the Disclosures.  Name of employee who helped you:	XSignature of Owner or Authorizing Company Officer		Date			Bank ID# 662
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to your please READ CAREFULLY BEFORE SIGNING: This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, W KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the Business Card Agreement, a copy of which will be mailed to the business application. If we undersigned shall be jointly and severally liable for any and all credit extender from time to time. I/We hereby certify and warrant that the statements made by me /us in this certificate are true and correct and that I /we have read the Important Disclosures in this application.  I/We certify that this business does not engage in Internet gambling pursuant to the Unlawful Internet Gambling Enforcement Act of 2006 as stated in the Disclosures.  Name of employee who helped you:						
AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to your PLEASE READ CAREFULLY BEFORE SIGNING: This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, W KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the Business Card Agreement, a copy of which will be mailed to the business application or the Business Card Agreement, a copy of which will be mailed to the business application or time to time. I/We hereby certify and warrant that the statements made by me /us in this certificate are true and correct and that I /we have read the Important Disclosures in this application.  I/We certify that this business does not engage in Internet gambling pursuant to the Unlawful Internet Gambling Enforcement Act of 2006 as stated in the Disclosures.    We intend to apply for joint credit. Initials and    Signature of Owner or Authorizing Company Officer   Date	X		Date			

## VISA® BUSINESS CARD IMPORTANT DISCLOSURES

Interest Rates and	l Interest Charges
Annual Percentage Rate (APR) for Purchases	<b>10.42%</b> <sup>1</sup>
Other APRs	Cash Advance APR 18% <sup>2</sup> Default Rate 18% <sup>3</sup>
Variable Rate Information	Your APR may vary. The rate is determined on the last day of each month by adding 6.92% to the "Prime Rate."
Grace Period for Purchases	25 Days⁴
Method of Computing the Balance	Average Daily Balance including New Purchases.5
Annual Fees	\$25.00 for each card.6
Transaction Fee for Cash Advance	\$5.00 or 2% of the amount of each advance, whichever is greater.
Late Payment Fee	\$25
Overlimit Fee	\$25
Return Check Fee	\$25

### Business account balances are due and payable in full each month upon receipt of credit card statement.

As of the date this application was designed (shown below) the information listed was accurate. Because rates and terms are subject to change, you may contact us for current information by writing to us at **P.O. Box 20810, Wichita, KS, 67208-6810.** 

- <sup>1</sup> The Prime Rate used to determine your **ANNUAL PERCENTAGE RATE** is the Rate published in the Wall Street Journal under the "Money Rates" subsection on the last business day of the month. If the closing date of the billing cycle is not a business day, then the first business day following the closing date of the billing cycle is used.
- <sup>2</sup> A Finance Charge will be imposed on cash advanced from the date made, or from the first day of the billing cycle in which the cash advance is posted to your account, whichever is later, and will continue to accrue on the unpaid average daily balance of such cash advances until the date of payment if paid during the same billing cycle, or until the closing date of the billing cycle, or until the closing date of the cycle preceding the date on which the entire New Balance is paid in full or until the date of payment if more than 25 days from the closing. If your account is paid in full within 25 days from the closing date of you-statement, no Finance Charges will be imposed during the current billing cycle for cash advances posted to your account during previous billing cycles.
- <sup>3</sup> If your account is or becomes more than 60 days past due at any time, or is otherwise in default in regard to any provision of the **Visa Business Card Agreement**, we may immediately increase the rate to a "Monthly Periodic Rate" of 1.500% (which is a corresponding ANNUAL PERCENTAGE RATE of 18%) effective with the first day of the next billing cycle of your account.
- <sup>4</sup> **A Finance Change** will be imposed on Credit Purchases only if you do not pay the entire New Balance shown on your monthly statement for the previous billing cycle within 25 days from the closing date of that statement and a late fee will be charged.
- <sup>5</sup> **The Finance Charge** for a billing cycle is computed by applying the Monthly Periodic Rate to the average daily balance of Credit Purchases, which is determined by dividing the sum of the daily balances during the billing cycle by the number of days in the cycle. Each daily balance of Credit Purchases is determined by adding to the outstanding unpaid balance of Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account, and subtracting any payments as received and credits as posted to your account, but excluding any unpaid **Finance Charges**.
- <sup>6</sup> See Business Cardholder Agreement for alternatives to avoid said Annual Fee.

#### **Unlawful Internet Gambling Enforcement Act of 2006**

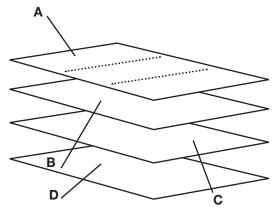
Transactions restricted by the Unlawful Internet Gambling Enforcement Act of 2006 are prohibited from being processed through this commercial account. You agree that such transactions will not be conducted through your account, and that you will notify Bankers' Bank of Kansas (BBOK) should your account be used for Internet Gambling of any kind. Please be advised that should Bankers' Bank of Kansas discover your account being used for such restricted transactions, we may terminate your access to certain payment systems and/or close your account.

The Visa Business Card Agreement should be reviewed for all conditions and terms.

BBOK is card issuer.

- DO NOT use excessive amounts of tape when closing the envelope as it might delay the processing of your application.
- DO NOT use industrial tape to close the envelope. Only use office tape.

STEP 1: FOLD THIS PANEL DOWN (INSIDE)



- A. Business Reply Envelope (created once folded)
- B. Blank Sheet of Paper (aides the privacy of your information)
- C. Your Completed Application
- D. Supporting Documentation

TAPE HERE



TAPE HERE

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



POSTAGE WILL BE PAID BY ADDRESSEE

BANKERS' BANK OF KANSAS SERVICE CENTER PO BOX 20810 WICHITA KS 67208-9767



TAPE HER

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STEP 2: FOLD THIS PANEL UP TO MAKE OUTSIDE (BACK)

STEP 3: TAPE TOP CLOSED WHERE IT SAYS "TAPE HERE" (DO NOT USE INDUSTRIAL TAPE)

STEP 4: TAPE ON BOTH ENDS (DO NOT USE INDUSTRIAL TAPE)

STEP 5: DO NOT STAPLE CLOSED