MECU PLATINUM MASTERCARD CREDIT CARD APPLICATION

If you are applying for joint credit, please indicate by placing your initials or signatures on the lines below, and complete both applicant and co-applicant information

| elo 'e | intend to apply for joint credit: | | | | | | | | | | | |
|---|--|---|------------------------------------|---------------|---|--|----------------|--|-------------------|------------------------------|---------------------------|-----------------------------------|
| | We wish to such face \(\sigma \text{Master Card Distincts}\) | Applicant | | ¬ [. | Dlease Inc | crease my | /our pres | Co-Ap sent credit lim | plicant | | | |
| | We wish to apply for: □MasterCard Platinum imit Desired: \$ \$500 min. | | | - 1 1 | | - | olders On | ly) Credit Card MasterCard Pl | d Number: | | | |
| ŀ | nare Account Number | (PI | LEASE P | RINT OI | R TYPE | IN BLAC | K OR B | LUE INK) | Date _ | | /_ | |
| | APPLICANT'S FULL NAME | BIRTH DATE | SOCIAL SE | CURITY NO | | HOME PHON | E / | | CELL PH AREA C | | 1 | |
| | ADDRESS | • | • | CITY | • | | STATE | ZIP | TIME / | AT ADDR | RESS | |
| | □ BUY □ RENT □ OWN MORTGAGE HOLDER OR LANDL | .ORD | PURCHASE | E PRICE | H | OME'S CUR | RENT VALU | E BALANC | CE DUE | 1 | MONTHLY PMT | |
| | PREVIOUS ADDRESS (IF LESS THAN 5 YEARS AT CURRENT ADDR | | | | | | | S LICENSE NO. | | | | |
| | NAME OF EMPLOYER | | | POSITIO | ARE | | AREA C | INESS PHONE NO. A CODE / COMPLETE FOR JOINT CREDIT, SE | | | GROSS MONTHLY INCOME \$ | |
| | <u> </u> | EMPLOYER NAME (IF LESS THAN 5 YEARS AT CURRENT EMPLOYER) YEARS 1 | | | OR IF YOU RESIDE IN A COMMUNITY PROPERTY STATE: (AZ, CA, ID, LA, NM, NV, TX, WA, WI) | | | | | DPERTY UNMARRIE /I) SEPARATE | | |
| | MAINTENANCE NEED NOT BE REVEALED IF YOU DO NOT WANT US TO CONSIDER IT IN DETERMINING YOUR CREDITWORTHINESS.) | NSIDER IT IN DETERMINING YOUR CREDITWORTHINESS.) | | | HAVE YOU EVER FILED BANKRUPTCY? YES NO DATE(S) HAVE YOU ANY LEGAL PROCEEDINGS AGAINST YOU? YES NO | | | | | | | |
| | NAME OF NEAREST RELATIVE NOT LIVING WITH YOU (NOT SPOU | DDRESS | PHONE NO. RELATIONSHIP AREA CODE / | | | | | | | | | |
| | LIST ALL DEBTS-INSTALLMENT PAYMENTS, CREDIT CARDS TO WHOM INDEBTED (if none check here) □ | S, ETC. LOAN WILL | . BE REJEC | TED IF AL | LL DEBTS ARE NOT LISTED. | | | CREDIT LIMIT | PRESE | PRESENT MONTH | | |
| | NAME ADDRESS | CITY, ST | ATE & ZIP C | ODE | | | 9 | (IF ANY) | BALAN | ICE | PAYMENT | |
| | | | | | | | | \$ | | \$ | | |
| | | | | | | | | | | | | |
| | OTHER OR LOATIONS (s. a. Esta Francis | | | | | | | | | | | |
| | OTHER OBLIGATIONS (e.g., list alimony and child support paid per month) You are not required to disclose income from alimony, child support or separate m | agintonanco Howovor if v | ou are relying or | n incomo from | alimony chile | d support or co | parato maintor | agnos as a basis for r | ongument of this | e obligatio | n place complete below | |
| | PAYER AMOUNT \$ | □ AL | IMONY IILD SUPPO | □ SE | PARATE | | YEARS | С | | OR LAS | T SIX MONTHS | |
| | | ACCOUNT NUMBER | IILD 30110 | BIRTH DA | | | ECURITY NO | | ME PHONE N | | | |
| | ADDRESS | CITY | I e | L., | IP | | AT ADDRES | ARE | A CODE | / | | |
| | □ BUY □ RENT □ OWN MORTGAGE HOLDER OR LANDL | | | | | (YRS) | | ARE | A CODE | | MONTHLY PMT | |
| | PREVIOUS ADDRESS (IF LESS THAN 5 YEARS AT CURRENT ADDR | | | | DRIVER'S LICENSE NO. | | | | | | | |
| | NAME OF EMPLOYER | DATE HIRED | | POSITIO | DN . | | BUSINE | SS PHONE NO. | | G | ROSS MONTHLY | |
| | PREVIOUS EMPLOYER NAME (IF LESS THAN 5 YEARS AT CURREI | | | YEARS THE | | POSITION | AREA C | | | IN | ICOME \$ | |
| | OTHER INCOME (INCOME FROM ALIMONY, CHILD SUPPORT AND SEPARATE | SOURCE | | | | HAVE YOU EVER FILED BANKRUPTCY? YES NO DATE(S) | | | | | | |
| N NAME OF NEAREST RELATIVE NOT LIVING WITH YOU (NOT SPOUSE) NOT HAVE YOU EVER FILED BANKROP TO HAVE SEPARATE SOURCE HAVE YOU EVER FILED BANKROP TO HAVE YOU GO NOT WANT US TO CONSIDER IT IN DETERMINING YOUR CREDITWORTHINESS.) NAME OF NEAREST RELATIVE NOT LIVING WITH YOU (NOT SPOUSE) COMPLETE ADDRESS PHONE NO. | | | | | _ PROCEEDINGS | | U? :: ELATION | | | | | |
| | LIST ALL DEBTS-INSTALLMENT PAYMENTS, CREDIT CARDS | | | | I DERTS | | EA CODE | / | SPACE AT | | DDITIONAL SHEET | |
| | TO WHOM INDEBTED (if none check here) NAME ADDRESS | | ATE & ZIP C | | L DLD10 | CREDIT LIMIT PRESENT MC | | | | MONTHLY PAYMENT | | |
| | 1.051.255 | G , G | | 002 | | | 3 | , , | \$ | | \$ | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | OTHER OBLIGATIONS (e.g., list alimony | | | | | | | | + | | | |
| | and child support paid per month) You are not required to disclose income from alimony, child support or separate m | naintenance. However, if y | ou are relying or | n income from | alimony, child | d support or se | parate mainter | nance as a basis for re | epayment of thi | s obligation | n, please complete below. | |
| PAYER AMOUNT CHILD SUPPORT MAINTENANCE CURRENT FOR LAST SIX MONTHS We hereby apply for a MasterCard Platinum Line of Credit Loan. The above statements are submitted for the purpose of obtaining credit. I/We certify that they are true, complete and correct. I/We understand that the Credit Union will retain this application whether or not it is approved. You are authorized to check my/our credit and employment to verify any statements made herein. Each person signing this application agrees to be jointly and severally responsible for payment of the account. I/We are members of the Credit Union and by signing here, I/We understand that the use of my/our card will constitute acknowledgment of receipt and agreement to the terms of the credit card agreement and disclosures. "I/We understand and agree that the closing of my/our Credit Union Share Account terminates my/our status as members of the Credit Union, and upon such closing I/We can no longer obtain credit with the Credit Union MasterCard Platinum card." How many cards would you like to be issued? (NO CARD WILL BE ISSUED IN THE NAME OF A PERSON WHO HAS NOT SIGNED THIS APPLICATION. ALL CARDHOLDERS MUST BE MECU MEMBERS.) | | | | | | | | T SIX MONTHS | | | | |
| | | | | | | | | 20 | | | | |
| | | | | | | | | 1APPLICANT - PRINT NAME X | | | | by CREDIT COMMITTEE APPROVED DATE |
| SIGNATURE OF APPLICANT DATE 2. | | | | | | | | | | | | |
| | CO-APPLICANT - PRINT NAME | | | | CRED | IT LIMIT: \$ | | | | | | |
| | SIGNATURE OF CO-APPLICANT | ☐ MasterCard Platinum | | | | | | | | | | |

DATE

SIGNATURE OF CO-APPLICANT

| Educational Credit Union MasterCard Platinum. To transfer balances, complete the fo (PLEASE PRINT) | rm below and return it with the attached application. We will handle the details for you! |
|---|---|
| Card Issuer | Card Issuer |
| Payment Address | Payment Address |
| City/State/Zip | City/State/Zip |
| Account # | Account # |
| need to make a payment on your other credit card account(s) to keep it current, ever for any additional charges or fees assessed by your other credit cards account(s), no contains disputed charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those charges may cause you to lose your rights with regard to those your rights with rights with regard to those your rights with rights with rights | Amount to Pay \$ |

Balance Transfer Form

Balances you have on high interest credit cards can be costing you much more than necessary. You can save money by transferring your current balances to your Michigan

REMOVE HERE AND RETAIN FOR YOUR RECORDS

Date

MICHIGAN EDUCATIONAL CREDIT UNION MASTERCARD PLATINUM CREDIT DISCLOSURE

| INTEREST RATES AND OTHER CHARGES | MasterCard Platinum | | | | | |
|---|---|--|--|--|--|--|
| Annual Percentage Rate (APR) for Purchases | 15.74%-21.00%, when you open your account, based on your creditworthiness. After that, your APR will vary with the market, based on the Prime Rate. | | | | | |
| APR for Balance Transfers | 15.74%-21.00%, when you open your account, based on your creditworthiness. After that, your APR will vary with the market, based on the Prime Rate. | | | | | |
| APR for Cash Advances | 15.74%-21.00%, when you open your account, based on your creditworthiness. After that, your APR will vary with the market, based on the Prime Rate. | | | | | |
| How to Avoid Paying Interest on Purchases | Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire balance by the due date each month. | | | | | |
| Minimum Interest Charge | None. | | | | | |
| For Credit Card Tips from the Federal Reserve Board | To learn more about factors to consider when applying for or using a credit card, visit the website of the Federal Reserve Board at http://www.federalreserve.gov/creditcard | | | | | |

| FEES | |
|---|---|
| Set-up and Maintenance Fees • Annual Membership Fee | None |
| Transaction Fees • Foreign Transaction | 1% of the converted U.S. dollar amount |
| Penalty Fees • Late Payment • Returned Payment Charge • Over-the-Credit Limit | Up to \$25 None None |
| Other Fees Damaged Card Replacement Statement Copy Draft Copy PIN Replacement Lost or Stolen Card Replacement | \$2 to replace damaged card \$1 per statement \$1 per draft \$2 No charge for first, second or third occurrence. \$50 per occurrence beginning with fourth occurrence. |

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)."

Signature X