CONSUMER LOAN APPLICATION

CREDIT REQU	JESTED				200	XXX				mar.		ZW.XZ	17201112		
Account Reques			Amt. Requested	#	of Pay	/men	its Pr	eferre	d Pmt. Amt.	WALLES OF THE PARTY.	erred Pmt.	The second second	Market	Survey	
☐Individual ☐ We intend to app		edit. S	Specific Purpose	of Load	n	•••					······································				
		0	Collateral Offered												
Applicant Co	-Applicant				****	1 T				916.00					
Complete the Ap Borrower, Cosign Individual credit.	pilcant Inform	atlon se	ction for the fir	st Appl	lcant. her for	Mark a di	the app	ropriat apacit	te box to Indic y. If the App	ate v licar	whether that is marrie	e Applic ed, he o	cantis rsher	applying as a nay apply for	
APPLICANT I	NFORMATI	ON:	□ Вогг	ower.	Cosi	gner	G	uaranto	or Grante	jr a] Other:		200		
Applicant's Full N	.ast)		ocial S	ecuri	curity Number Former Names			and /	Aliases						
Home Phone Date of Birth			river's License N	nse Number Ages			of Dependents Years			ears of Education			Years in Current Profession		
ADDRESS INFOR Home Address (s		lp Code) (I	f rural, show Road ar	nd Box No)							Since		1 =)wn	
Mailing Address	(Street or P.O. Bo)	r, City, Stat	e, Zip Code)								1		<u> 11 1</u>	lent	
Previous Home Ad	ddress (Street, C	ily, State,	Zip Code)									From		То	
EMPLOYMENT IN	FORMATION												1 (April 10 (Apr		
Applicant's Emplo	yer (if Self-Emplo	yed, Name	and Nature of Busine	:88)		Bus	siness Ad	dress	(Street, City, State	, Zip (Code)				
Type of Business		Supervi	sor	Phone	Numbe	er	Title / F	Position	r	SIn	се	Sala	•		
Second Employer	(If Self-Employed,	Name and A	fature of Business)	I		Bus	siness Ad	dress	(Street, City, State), Zip (Code)			per	
Type of Business		Superv	sor	Phone	Numbe	ər	Title / F	osition	า	Sin	се	Salary			
RERSONAL REFE	RENCES	Mark Confliction		<u> </u>						!				per	
Name			Address (Street	et or P.O.	Box, City,	State	, Zip Code)			20,000 00000	Phone N	umber	Rela	tionship	
										•					
COMPLETION	INSTRUCT	ions i	OR CO-APP	LICAS	ITS	(Luni						tern March 1995	*********		
(a) If you are app the Applicant is a assets of anothe possible, providin relying. (c) If the credit requested,	lying for joint applying for in r person as t ig information Applicant res	credit or dividual he basis about ti ides in a	will be permitte credit, but rely for repayment he person on vi- community pro-	ed to us ing on the t of the whose a perty st	e the a income credit allmony tate or i	from requ sup	n allmony uested, o oport, or lying on p	, child comple maint propert	f support, or a ete the Co-Ap enance paym by located in s	sepai plica ents	rate mainte int Informa or income	enance of ation sets or ass	or on ti ction, t ets the	ne income or o the extent Applicant is	
CO-APPLICAN		оо-арри Отнокі	Borro		Cosi	***********			arits spouse. Facili Granto		l ous		71.h., W., 11198.		
Co-Applicant's Ful		.i. Last)	LJ BOIT				y Numbe	000000000000000000000000000000000000000	ormer Names a			Allen Grand			
Home Phone	Date of Birth	Dri	ver's License N	umber	Age	s of	Depende	nts	Years of E	duca	tion	Years in	n Curre	nt Profession	
ADDRESS INFOR Home Address (Str		o Cada) (if	used show Dood on	1 D N-1							Since				
				a Bux Ru)							SINCE		□ R		
Mailing Address (Street or P.O. Box,	City, State	, Zlp Code)												
Previous Home Ad	dress (Street, C	lty, State, Z	ip Code)									From		То	
EMPLOYMENT IN Co-Applicant's Em				siness)		Bus	iness Add	dress ((Street, City, State	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ode)			W.	
Type of Business		Supervis	sor	Phone	Numbe	r	Title / P	osition		Sind	ce	Salar	_		
Second Employer (If Self-Employed, N	ame and Na	ature of Business)		·	Busi	lness Add	dress ((Street, City, State	. ZIP C	ode)	1		oer	
Type of Business		Supervis	sor	Phone	Numbe	r	Title / P	osition		Sinc	Э	Salar	у		
PERSONAL REFER	RENÇES													oer	
Name			Address (Street	t or P.O. B	ox, City, S	State,	Zip Code)				Phone Nu	mber	Rela	ionship	
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☐Yes	□No	☐Yes	□No	Are there any outstall you?	anding judgments against						
□Yes	□No	□Yes	ΠNo	Have you ever been de	clered bankrunt?						
Yes	□No	Yes			foreclosed upon or given						
LITES	LING	1108	Шио		reof in the last 7 years?						
Yes	□No	□Yes	□No	Are you party to a law							
□Yes	□Nc	□Yes	□No		n any loan resulting In						
				judgment, foreclosure							
Yes	□Nc	Yes	□No	Are you delinquent/ir debt. financial obli	default on any Federal						
□Yes	Пис	□Yes	□No	guarantee?	pay alimony, child support,						
□ 169	LINC		LINO	or separate maintenant							
Yes	□No	□Yes	No	Is any part of the down	payment borrowed?						
Yes	□No	Yes	No		an endorser on a loan?		-				
☐ Yes		☐Yes	□No		rchandise repossessed?						
Yes	□No	Yes	□No		denied credit with this	***					
□Yes	□Nc	Yes	□No	Are you a U.S. citizen?	1						
Yes	□ Nc	Yes	□No	If no, are you a re:	sident allen?						
Yes	□No	∐Yes	□No	If no, are you a no	n-resident allen?	and the second s		anar manar bawile	COCKE OF THE ALLES		evereve e
PREV	IOUS	REDIT R	REFEREN	ICES		<u> </u>		**************************************	A	X	
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Officer No. / Name	Approved By	Concurrence By (If Needed)	Committee Date	Decision Date			
Branch	Application Date	Application No.	Commitment No.	Loan No.			
Originator Name		Loan Origination Company's	Name				
Mortgage Loan Originato	or Unique Identifier, if applicable:	Mortgage Loan Origination Company Identifier, if applicable:					
Decision and Comments	: Approved Denied Inco	mplete Counteroffer Cor	nditional Approval D W	lithdrawal Other:			

INSURANCE DISCLOSURE FOR CREDIT APPLICATION

Applicant:

Acknowledgment.

APPLICANT:

Applicant

A	Applicant:	Lender:	Thayer County Bank a Nebraska Banking Corporation 402 Lincoln Avenue P.O. Box 109 Hebron, NE 68370-0109 (402) 768-6027
		IMPORTANT	
		I THIS FORM UNTIL YOU CA AND UNDERSTAND ITS COI	
	Purpose.		
	You have submitted an application for a loan. In connection an insurance product or annuity. Federal law requires Lende	n with your loan application, er to provide you with the fol	Lender may be soliciting, offering to sell, or will sell you lowing disclosures.
	Credit Disclosures.		
	 Lender, as a condition of granting you a loan, cannot reaffiliates. 	require that you purchase ar	n insurance product or annuity from Lender or any of
	Lender, as a condition of granting you a loan, cannot product or annuity from an unaffiliated entity.	require your agreement no	ot to obtain or prohibit you from obtaining an insuran

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

INSURANCE DISCLOSURE FOR CREDIT APPLICATION (Continued)

Page 2

BY SIGNING BELOW I ACKNOWLEDGE ON BEHALF OF THE L APPLICANT AND THAT APPLICANT ACKNOWLEDGED RECEI	ENDER THAT AN ORAL DISCLOSURE OF INSURANCE WAS DULY MADE TO THE PT OF THE DISCLOSURE.
LENDER:	
THAYER COUNTY BANK	
XAuthorized Signer	Date
Title:	

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