Uniform Residential Loan Application

| H | | | U | mom | Resid | uentia | ai Loan | Appi | ication | | | | |
|--|---|--|---------------------------------|---|---|---|--|---|--|--------------------------------|-----------|-----------------------------------|---|
| must also be pro the income of considered beca | ovided (and the a or assets of the ause the spouse of | appropriate box checke Borrower's spouse or or other person has co | d) when other per mmunity | the income son who has co property rights | or assets o mmunity pro pursuant to | of a person operty right applicable | other than the B ts pursuant to st law and Borrowe | orrower (inc ate law will er resides in | m as "Borrower" or "C luding the Borrower's not be used as a basis a community property | spouse) will s for loan qua | be used a | as a basis for n, but his or h | loan qualification o |
| | | is relying on other pro | | | | - | | | oan. | | | | |
| ir uiis is air appi | iication for joint (| credit, Borrower and C | O-BOITOW | ver each agree tr | at we inten | id to apply | tor joint credit (s | ign below): | | 3 | | | |
| Borrowe | | | | | | <u> </u> | 3 | | | | | | |
| DOTTOWE | I | | | TVD=70 | E MOR | | Borrower E AND TE | PMS 0 | E I OAN | | | | |
| Mortgage | □va | Conventional | | Other (explain): | 6.000 | | Agency Case Nu | ****** | | Lender Cas | e Numbe | er | |
| Applied for: | ☐ FHA | USDA/Rural Housing Service | | (| | | , igallo, 2000 ; ia | | | Londor Gal | o realise | | |
| Amount | | Interest Rate | | No. of Months | Amortization | on | Fixed Rate | | Other (explain): | | | | |
| \$ | | | % | | | *************************************** | □ GРМ | VI.11=V=V-V-V | ARM (type): | | | | |
| Subject Property | v Address (stree | t, city, state, & ZIP) | | KUMERIN | #INFOF | XIVIA I II | ynwainibai | (UKHU) | E OF LOAN | | | | No. of Units |
| | | | | | | | | | | | | | THO. OF CHILD |
| Legal Description | n of Subject Pro | perty (attach descripti | on if nece | essary) | | | | | | | | | Year Built |
| | П_ | | | | | | | | Property will be: | | | | |
| Purpose of Loan | n 🔲 Purd 🔲 Refi | | Construc | | | L Othe | er (explain): | | ☐ Primary | ☐ Seco | ndary | П. | |
| Complete th | | nstruction or con | | tion-Permanent | nt loan | | | | ☐ Residence | ☐ Resid | dence | Inve | stment |
| Year Lot Acquired | Original Cost | | | ount Existing Lie | | (a) Prese | ent Value of Lot | | (b) Cost of Improvem | ents | Total (| (a + b) | |
| Acquired | \$ | | \$ | | | \$ | | | \$ | | \$ | | |
| Complete th | <u> </u> | s is a refinance l | | | | 1 * | | | | | ΙΨ | | |
| Year Acquired | Original Cost | | Amo | ount Existing Lie | ens | Purpose | of Refinance | | Describe Improve | ements | ☐ ma | de 🗌 to | be made |
| | \$ | | \$ | | | | | | Cost: \$ | | | | |
| Title will be held | d in what Name(| s) | | | | | | Manner in | which Title will be hel | d | | Estate will | be held in: |
| | | | | | | | | | | | | Fee Sim | |
| Source of Down | n Payment, Settl | ement Charges and/or | Subordin | nate Financing (e | explain) | | | | | | | Leaseho expiration | old (show on date) |
| | | Born | wer | Į į | . BORI | ROWE | RINFORM | ATION | Co-Boi | Tower | | I | |
| Borrower's Nam | ne (include Jr. or | Sr. if applicable) | | | | | Co-Borrower | s Name (incl | ude Jr. or Sr. if applica | able) | | | |
| Social Security | | ne Phone II. area code) | | DOB (MM/DD/YYY | n Yr | rs. School | Social Securit | y Number | Home Phone (incl. area code) | | DOB | (MM/DD/YYYY) | Yrs. School |
| Married | | | Depe | endents (not list | ed by Co-Bo | orrower) | Married | | L- · | De | ependent | s (not listed ! | by Borrower) |
| Separated | Unma single | rried (include , divorced, widowed) | no. | ages | | | Separated | | Inmarried (include single, divorced, widow | ved) | no. | ages | |
| Present Addres | ss (street, city, s | tate, ZIP) | | wn 🗌 R | ent | No. Yrs. | . Present Addre | ss (street, c | ity, state, ZIP) | | Own | Rent | No. Yrs. |
| Mailing Addres | ss, if different fro | m Present Address | • | | | | Mailing Addre | ss, if differe | nt from Present Addre | ss | | | |
| | esent address for s (street, city, sta | r less than two years, oate, ZIP) | complete | | Rent | No. Yrs. | . Former Addre | ss (street, c | ity, state, ZIP) | | Own | Rent | No. Yrs. |
| | | | | | | | | | | | | | |
| | | Borr | wer | IV. | EMPL | OYME | NT INFOR | MATIO | N Co-Bo | rower | | | |
| Name & Addres | ss of Employer | | ☐ Se | elf Employed | Yrs. or | n this job | Name & Addr | ess of Empl | oyer | | Self Em | ployed | Yrs. on this job |
| | | | | | Yrs. e in this work/p | employed s line of profession | | | | | | | Yrs. employed in this line of work/profession |
| Position/Title/Ty | ype of Business | | | Business Ph (incl. area c | | | Position/Title | Type of Bus | iness | | | usiness Phone ncl. area code | |
| If employed in o | current position t | or less than two years | or if cur | rently employed | in more tha | an one posit | tion, complete th | e following: | | | | | |
| Name & Addres | ss of Employer | | ☐ se | elf Employed | Dates (| (from - to) | Name & Addr | ess of Empl | oyer | | Self Em | ployed | Dates (from - to) |

Monthly Income

Monthly Income

| | V. MOI | NTHLY INCOME A | ND COMBINED H | OUSING EXPENSE | INFORMATION | T |
|---|--|---|--|--|--|---|
| Gross Monthly Income | Borrower | Co-Borrower | Total | Combined Monthly Housing Expense | Present | Proposed |
| Base Empl. Income* | \$ | \$ | \$ | Rent | \$ | |
| Overtime | | | | First Mortgage (P&I) | | \$ |
| Bonuses | | | | Other Financing (P&I) | | |
| Commissions | | | - | Hazard Insurance | <u></u> | |
| Dividends/Interest | | | | Real Estate Taxes | | |
| Net Rental Income | | | | Mortgage Insurance | 3 | |
| Other (before completing, see the notice in "describe other income," below) | | | | Homeowner Assn. Dues Other: | | |
| Total | \$ | \$ | \$ | Total | | Φ. |
| | | provide additional documentati | | | \$ | \$ |
| Describe Other Inco | | Notice: Alin if th | nony, child support, o | r separate maintenance ir Borrower (C) does not ch | | red |
| B/C | | | | | | Monthly Amount |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | | | |
| | | V | . ASSETS AND I | LIABILITIES | | |
| meaningfully and fairly pre- this Statement and support ASSE Description | sented on a combined be ting schedules must be | asis; otherwise, separate Stat completed about that spouse of Cash or Market Value | ements and Schedules are re- or other person also. Liabilities and Pledged As- automobile loans, revol- continuation sheet, if nec- | ried Co-Borrowers if their assets a quired. If the Co-Borrower sections ssets. List the creditor's name, a ving charge accounts, real esta cessary. Indicate by (*) those liab | n was completed about a non-ar Completed ddress and account number for tte loans, alimony, child suppor | plicant spouse or other personal Jointly Not Jointly all outstanding debts, including the port, stock pledges, etc. U |
| Cash deposit toward purchase held by: | | \$ | upon refinancing of the s | ubject property. | Monthly Payment & | Unweist Balance |
| | | | | | Months Left to Pay | Unpaid Balance |
| List checking and sa | | | Name and address of Co | mpany | \$ Payment/Months | \$ |
| Name and address of Bank | | | Acct. no. | | | |
| Acct. no. | | \$ | Name and address of Co | mpany | \$ Payment/Months | \$ |
| Name and address of Bank | r, S&L, or Credit Union | | | | | |
| | | | Acct. no. Name and address of Co | mnany | \$ Payment/Months | \$ |
| Acct. no. | | s | | mpany | 4 T dymentismonals | Ψ |
| Name and address of Bank | s, S&L, or Credit Union | | Acct. no. | | | |
| | | | Name and address of Co | mpany | \$ Payment/Months | \$ |
| Acct. no. | | \$ | | | | |
| Name and address of Bank | x, S&L, or Credit Union | | | | | |
| | | | Acet. no. | | | |
| Acct. no. \$ | | | Name and address of Co | mpany | \$ Payment/Months | \$ |
| Stocks & Bonds (Company name/number description) | , | \$ | | | | |
| | | | Acct. no. | | | |
| | | | Name and address of Co | mpany | \$ Payment/Months | \$ |
| Life insurance net cash val | ue | \$ | | | | |
| Subtotal Liquid Ass | ets | \$ | 1 | | | |
| Real estate owned (enter n | | \$ | - | | | |
| from schedule of real estate owned) | | | Acet no | | = | |

| | | VI. ASSE | TS AN | BIE/ABIE | TIES (cont.) | | | | |
|--|---|---|---|--|--|--|--|---|--|
| Schedule of Real Estate Owned (If addition | al properties a | | | | italiainataatti. Yeettadistoisiai 18800 | | | | |
| Property Address (enter S if sold, PS if pending sale or R if rental being held for income) | | Type of Property | | resent tet Value | Amount of Mortgages & Liens | Gross Rental Income | Mortgage Payments | Insurance, Maintenance, Taxes & Misc. | Net Rental Income |
| | | | | | * | | | | |
| | | | \$ | | \$ | \$ | \$ | \$ | \$ |
| | | | | | | - | | | |
| * | | | | | | , |) | | |
| | | | | | | | | | |
| | | Totals | | | <u></u> | | | | |
| List any additional names under which credit has previous | iously been red | | \$ appropriate | creditor name(s | s) and account number(| s): | \$ | \$ | \$ |
| Alternate Name | | | reditor Nan | _ | , , | • | Acc | ount Number | |
| | | | | | | | | | |
| | | | | | | | | | |
| VII. DETAILS OF TRA | NSACTI | ON | | | VIII. | DEGLARA | TIONS | | |
| a. Purchase price | \$ | | If you a | nswer "Yes" to | any questions a throug | | | Вогго | ver Co-Borrower |
| b. Alterations, improvements, repairs | | | use con | tinuation sheet | for explanation. | | | Yes | No Yes No |
| c. Land (if acquired separately) | ļ | | a. Are | there any outst | anding judgments agai | nst you? | | | |
| d. Refinance (incl. debts to be paid off) | | | b. Hav | e you been dec | ared bankrupt within th | ne past 7 years? | | | |
| e. Estimated prepaid items | | | | e you had prope eof in the last 7 | erty foreclosed upon or vears? | given title or deed | d in lieu | Ц | |
| f. Estimated closing costs g. PMI, MIP, Funding Fee | - | | | you a party to | - | | | | |
| h. Discount (if Borrower will pay) | | | | | r indirectly been obliga | | | | |
| i. Total costs (add items a through h) | | | (Thi | s would include | r of title in lieu of forect such loans as home r | nortgage loans, Si | BA loans, home | | |
| j. Subordinate financing | | | any | mortgage, fina | , educational loans, mancial obligation, bond | l, or loan guaran | itee. If "Yes," | | |
| k. Borrower's closing costs paid by Seller | | | case | number, if any | luding date, name and , and reasons for the a | iction.) | | | |
| I. Other Credits (explain) | - | | loar | i, mortgage, fina | delinquent or in default ancial obligation, bond, | or loan guarantee | ? | Ц | |
| | | | ! | _ | s as described in the plot pay alimony, child su | • , | | | |
| | | | | • | o pay allmony, child so own payment borrowe | , . | maintenance; | | |
| Loan amount (exclude PMI, MIP, Funding Fee financed) | | | | • | r or endorser on a note | | | | |
| n. PMI, MIP, Funding Fee financed | | | | you a U.S. citiz | | | | | |
| o. Loan amount (add m & n) | | | - | k. Are you a permanent resident alien? | | | | | |
| | | | i. Do | vou intend to o | ccupy the property as y | our primary reside | ence? | | |
| | | | | | question m below. wnership interest in a p | ronerty in the last | three years? | П | |
| p. Cash from/to Borrower (subtract j,k,l & o from i) | | | | - | perty did you own – pr | , , | • | <u> </u> | |
| | | | se | cond home (SH |), or investment proper | ty (IP)? | | | - |
| | | | (2) H wi | ow did you hold th your spouse | f title to the home – by (SP), or jointly with an | yourself (S), joint other person (O)? | lly | | _ |
| | IX | . ACKNOW | /LEDG | MENT AN | ID AGREEME | NT | | | 1 |
| Each of the undersigned specifically represents to Ler | der and to Le | nder's actual or pot | ential agen | ts, brokers, pro | cessors, attorneys, insu | ırers, servicers, sı | uccessors and as | signs and agrees a | nd acknowledges |
| that: (1) the information provided in this application this application may result in civil liability, including the provided to fine or | is true and cor monetary dam imprisonment | rect as of the date ages, to any persor | set torth op n who may provisions | oposite my sign suffer any loss of Title 18 Unit | ature and that any inte due to reliance upon | entional or neglige any misrepresenta 1001, et seg : (2 | nt misrepresental ation that I have | tion of this information and this app | ition contained in lication, and/or in |
| that: (1) the information provided in this application this application may result in civil liability, including criminal penalties including, but not limited to, fine or "Loan") will be secured by a mortgage or deed of tru this application, are made for the purpose of obtainin retain the original and/or an electronic record of this rely on the information contained in the application, should change prior to closing of the Loan; (8) in the remedies that it may have relating to such delinque account may be transferred with such notice as may express or implied, to me regarding the property or the terms are defined in applicable federal and/or state is | st on the prop | erty described in the mortgage loan; (5) | is application the proper | on; (3) the prop rty will be occu | perty will not be used for the control of the contr | or any illegal or pi s application: (6) | rohibited purpose the Lender, its s | or use; (4) all sta ervicers, successor | s application (the stements made in s or assigns may |
| retain the original and/or an electronic record of this rely on the information contained in the application, | application, whand I am oblig | ether or not the Lo | oan is appr 1/or suppler | oved; (7) the linent the inform | ender and its agents, lation provided in this | orokers, insurers, application if any | servicers, succes of the material f | sors, and assigns i acts that I have re | may continuously |
| should change prior to closing of the Loan; (8) in the remedies that it may have relating to such delinquent may be transferred with such actions are | he event that cy, report my | my payments on the name and account | he Loan be information | come delinquer to one or more | nt, the Lender, its server consumer reporting a | icers, successors gencies; (9) own | or assigns may, ership of the Loa | in addition to any n and/or administr | other rights and ation of the Loar |
| express or implied, to me regarding the property or the terms are defined in applicable federal and/or state is | ne condition or nesws (excluding | value of the prope audio and video re | rty; and (11 cordings). |) my transmiss or my facsimile | ion of this application a transmission of this ar | ers, successors of es an "electronic re enlication containir | ecord" containing | my "electronic signature sha | gnature" as those |
| enforceable and valid as if a paper version of this app <u>Acknowledgment.</u> Each of the undersigned hereby a | lication were d | elivered containing | my original | written signatu | re. | | | | |
| obtain any information or data relating to the loan, for | any legitimate | business purpose | through any | source, includi | ng a source named in t | his application or | a consumer repo | ting agency. | пів арріісацогі о |
| Borrower's Signature | | Date | | Co-Borro | wer's Signature | | | Date | • |
| X | | | | X | | | | | |
| | | | | | | | | | |
| | *************************************** | | ********* | ******************************* | MONITORIN | | | | |
| The following information is requested by the Federa home mortgage disclosure laws. You are not require | d to furnish thi | s information, but a | are encoura | aed to do so. T | The law provides that a | ı lender may not d | liscriminate eithe | on the basis of th | is information or |
| on whether you choose to furnish it. If you furnish the under Federal regulations, this lender is required to information, please check the box below. (Lender in | note the infor | mation on the basi | s of visual | observation an | d surname if you have | made this applic | cation in person. | If you do not wi | sh to furnish the |
| particular type of loan applied for.) | | o above material (| o acouse illi | | | onto to writeri the | render is subjec | синчен аррисаріе | SIGIC IGW TOT INE |
| BORROWER | $\overline{}$ | | | CO-BORRO | | ot wish to furnish | | | |
| Ethnicity: | | IIIC OF LATINO | | Ethnicity: | ☐ Hispar | nic or Latino | Not Hispanic | or latino | |

| Loan Originator Company's Name | Loan Origination Company Identifier | Loan Origination Company's Address |
|--------------------------------|-------------------------------------|------------------------------------|
| | | |

The purpose of collecting this information is to help ensure that all borrowers are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask borrowers for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race". The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

| borrower: | Co-Borrower: |
|---|---|
| Ethnicity: Check one or more Hispanic or Latino Mexican Puerto Rican Cuban Other Hispanic or Latino - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on: | Ethnicity: Check one or more Hispanic or Latino Mexican Puerto Rican Cuban Other Hispanic or Latino - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on: |
| ☐ Not Hispanic or Latino ☐ I do not wish to provide this information | ☐ Not Hispanic or Latino☐ I do not wish to provide this information |
| Race: Check one or more American Indian or Alaskan Native - Print name of enrolled or principal tribe: | Race: Check one or more American Indian or Alaskan Native - Print name of enrolled or principal tribe: |
| Asian Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian - Print race, for example, Hmong, Laottan, Thai, Pakistani, Cambodian, and so on: | Asian Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian - Print race, for example, Hmong, Laottan, Thai, Pakistani, Cambodian, and so on: |
| ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on: | ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on: |
| ☐ White ☐ I do not wish to provide this information | ☐ White ☐ I do not wish to provide this information |
| Sex: Female Male I do not wish to provide this information | Sex: Female Male I do not wish to provide this information |
| To Be Completed by Financial Institution (for an application taken in person Was the ethnicity of the borrower collected on the basis of visual observation or surname? Yes No | n): Was the ethnicity of the co-borrower collected on the basis of visual observation or surname? ☐ Yes ☐ No |
| Was the race of the borrower collected on the basis of visual observation or surname? ☐ Yes ☐ No | Was the race of the co-borrower collected on the basis of visual observation or surname? ☐ Yes ☐ No |
| Was the sex of the Borrower collected on the basis of visual observation or surname? ☐ Yes ☐ No | Was the sex of the co-Borrower collected on the basis of visual observation or surname? ☐ Yes ☐ No |

| | CONTINUATION SHEET/RESIDENTIAL LOAN APPLICATION | |
|---|---|---------------------|
| Use this continuation sheet if you need more space to complete the | Borrower: | Agency Case Number: |
| Residential Loan Application: Mark B for Borrower or C for Co-Borrower. | Co-Borrower: | Lender Case Number: |

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JOINT APPLICATION ACKNOWLEDGMENT

| Applicant: | Lender: | Thayer County Bank a Nebraska Banking Corporation 402 Lincoln Avenue P.O. Box 109 Hebron, NE 68370-0109 (402) 768-6027 |
|--|---------|--|
| We, the undersigned, intend to apply for joint credit. | | |
| APPLICANT(S): | | |
| XApplicant | Date | |
| X | Date | |

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| CERTIFICATION AND AUTHORIZATION | | | | | | |
|-------------------------------------|---|--|--|--|--|--|
| App | Lender: Thayer County Bank a Nebraska Banking Corporation 402 Lincoln Avenue P.O. Box 109 Hebron, NE 68370-0109 (402) 768-6027 | | | | | |
| | CERTIFICATION | | | | | |
| То | Thayer County Bank ("Lender"): | | | | | |
| 1. | Applicant (and co-applicant if applicable), | | | | | |
| 2. | Applicant understands and agrees that Lender may verify any information provided to Lender concerning Applicant's application, including, but without limitation, verifications from financial institutions of the information provided. | | | | | |
| 3. | Applicant fully understands that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this loan, as applicable under the provisions of Title 18, United States Code, Section 1014. | | | | | |
| | AUTHORIZATION TO RELEASE INFORMATION | | | | | |
| To | Whom It May Concern: | | | | | |
| 1. | Applicant has applied for a loan from Thayer County Bank ("Lender"). As part of the application process Lender, any insurer of the loan and any collateral title insurer may verify information Applicant provided to Lende either before or after the loan is closed. | | | | | |
| 2. | Applicant authorizes you to provide to Lender, to any investor to whom Lender may sell Applicant's loan, and to any insurer of the loan any and all information and documentation that they may request. Such information may include, but is not limited to, income; bank, money market, and similar account balances; credit history; and copies of income tax returns. | | | | | |
| 3. | Lender, any investor that purchases the loan, and any insurer of the loan may address and send this authorization to any person or company named in the loan application. | | | | | |

5. Your prompt reply to Thayer County Bank, to any investor that purchases the loan, and to any insurer of the loan

AUTHORIZATION TO FILE FINANCING STATEMENT

Applicant hereby authorizes Lender to file the appropriate Financing Statements for the following collateral prior to executing a security agreement, pledge, or control agreement:

4. A copy of this authorization may be accepted as an original.

is appreciated.

CERTIFICATION AND AUTHORIZATION (Continued)

Page 2

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| APPLICANT: | | | | |
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| | | Co-Applicant | | Date |
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| | Date | | | |
| Applicant | | | | |
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Thayer County Bank 402 Lincoln Ave. P.O. Box 109 Hebron, NE 68370-0109 Phone: (402) 768-6027

APPRAISAL NOTICE

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close.

You can pay for an additional appraisal for your own use at your own cost.

By signing below, you acknowledge receipt of this **Appraisal Notice.**

| APPLICANT: | |
|------------|------|
| ${f X}$ | |
| Applicant | Date |
| X | |
| Applicant | Date |

ELECTRONIC COMMUNICATIONS AGREEMENT

Collateral

Dept.

Officer

Init.

Loan Amount

App. Date

Application No.

| References in the boxes above are for Lender's use only and | do not limit the applicability of t | his document to any particular loan or item. | | | |
|---|-------------------------------------|---|--|--|--|
| Applicant: | Lender: | Thayer County Bank a Nebraska Banking Corporation 402 Lincoln Avenue P.O. Box 109 Hebron, NE 68370-0109 (402) 768-6027 | | | |
| From time to time we may send you information a reference to other inquiries. If required by law and a communication as required by the Electronic Signal information may also be provided in hard copy. No consent. If you would like to receive email from us never request personal or sensitive information via a law would like to receive emails from Thayer County Bar | emaii from you. | | | | |
| | mail address) | | | | |
| (e-mail address) I understand that I am not required to consent to the electronic delivery of information or documents and separate ESIGN Act consumer consent to electronic delivery may be required for certain types of communications. APPLICANT: X Applicant Date | | | | | |
| · | | | | | |

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TELEPHONE COMMUNICATIONS CONSENT

Dept.

Collateral

Officer

Init.

Loan Amount

Application No.

App. Date

| References in the boxes above are for Lender's use only and do not limit t | the applicability of | this document to any particular loan or item. | | | |
|--|---------------------------|--|--|--|--|
| Applicant: | Lender: | Thayer County Bank a Nebraska Banking Corporation 402 Lincoln Avenue P.O. Box 109 Hebron, NE 68370-0109 (402) 768-6027 | | | |
| I authorize Thayer County Bank to deliver non-emergency messages, to the following phone number: | voice calls | and texts, which may include telemarketing | | | |
| (telephone number) | | | | | |
| I understand and agree that such phone calls and texts resystem, which can include any phone that is not a rotary ph | may be del none, or an | livered using an automatic telephone dialing artificial or prerecorded voice. | | | |
| I understand and agree that I am not required to consent to service. | be contact | red as a condition to receiving any product or | | | |
| APPLICANT: | | | | | |
| X Applicant Date | | | | | |

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INSURANCE DISCLOSURE FOR CREDIT APPLICATION

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Lender:

Thayer County Bank

a Nebraska Banking Corporation

402 Lincoln Avenue P.O. Box 109

Hebron, NE 68370-0109

IMPORTANT

DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY READ IT AND UNDERSTAND ITS CONTENT

Purpose.

You have submitted an application for a loan. In connection with your loan application, Lender may be soliciting, offering to sell, or will sell you an insurance product or annuity. Federal law requires Lender to provide you with the following disclosures.

Credit Disclosures.

- Lender, as a condition of granting you a loan, cannot require that you purchase an insurance product or annuity from Lender or any of its
 affiliates.
- 2. Lender, as a condition of granting you a loan, cannot require your agreement not to obtain or prohibit you from obtaining an insurance product or annuity from an unaffiliated entity.

Acknowledgment.

APPLICANT:

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

X Applicant Date

Form **4506-T**

Department of the Treasury Internal Revenue Service

Request for Transcript of Tax Return

▶ Do not sign this form unless all applicable lines have been completed.

► Request may be rejected if the form is incomplete or illegible.

► For more information about Form 4506-T, visit www.irs.gov/form4506t.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy

OMB No. 1545-1872

| of your | return, use Form 4506, Request for Copy of Tax Return. There is a | fee to get a copy of your return. | | | | | | |
|--------------------------------|---|---|---|--|--|--|--|--|
| | Name shown on tax return. If a joint return, enter the name shown first. | 1b First social security number on tax number, or employer identification | return, individual taxpayer identification number (see instructions) | | | | | |
| 2a | If a joint return, enter spouse's name shown on tax return. | 2b Second social security numbe identification number if joint to | r or individual taxpayer ıx return | | | | | |
| 3 | Current name, address (including apt., room, or suite no.), city, st | ate, and ZIP code (see instructions) | | | | | | |
| 4 | Previous address shown on the last return filed if different from lin | ne 3 (see instructions) | | | | | | |
| 5 C | Customer file number (if applicable) (see instructions) | | | | | | | |
| | Effective July 2019, the IRS will mail tax transcript requests only t 2 for additional information. | o your address of record. See What's Ne | w under Future Developments on | | | | | |
| 6 | Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ | | | | | | | |
| а | Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days | | | | | | | |
| b | | | | | | | | |
| С | Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days | | | | | | | |
| 7 | Verification of Nonfiling, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days | | | | | | | |
| 8 | Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days . | | | | | | | |
| | on: If you need a copy of Form W-2 or Form 1099, you should first our return, you must use Form 4506 and request a copy of your re | | Form W-2 or Form 1099 filed | | | | | |
| 9 | Year or period requested. Enter the ending date of the year years or periods, you must attach another Form 4506-T. For each quarter or tax period separately. | | | | | | | |
| <u> </u> | | / / / | / / / | | | | | |
| Signation shareholder signatur | ture of taxpayer(s). I declare that I am either the taxpayer who ation requested. If the request applies to a joint return, at least nolder, partner, managing member, guardian, tax matters partner that I have the authority to execute Form 4506-T on behalf of ture date. | ose name is shown on line 1a or 2a, or st one spouse must sign. If signed by a er, executor, receiver, administrator, trust the taxpayer. Note: This form must be re | corporate officer, 1 percent or more ee, or party other than the taxpayer, I seeived by IRS within 120 days of the Phone number of taxpayer on line | | | | | |
| na | s the authority to sign the Form 4506-T. See instructions. | 1 | 1a or 2a | | | | | |
| Sign | Signature (see instructions) | Date | | | | | | |
| Here | Title (if line 1a above is a corporation, partnership, estate, or trust |) | | | | | | |
| | Spouse's signature | Date | | | | | | |

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

What's New. As part of its ongoing efforts to protect taxpayer data, the Internal Revenue Service announced that in July 2019, it will stop all third-party mailings of requested transcripts. After this date masked Tax Transcripts will only be mailed to the taxpayer's address of record.

If a third-party is unable to accept a Tax Transcript mailed to the taxpayer, they may either contract with an existing IVES participant or become an IVES participant themselves. For additional information about the IVES program, go to www.irs.gov and search IVES.

General Instructions

Caution: Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note: If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Customer File Number. The transcripts provided by the IRS have been modified to protect taxpayers' privacy. Transcripts only display partial personal information, such as the last four digits of the taxpayer's Social Security Number. Full financial and tax information, such as wages and taxable income, are shown on the transcript.

An optional Customer File Number field is available to use when requesting a transcript. This number will print on the transcript. See Line 5 instructions for specific requirements. The customer file number is an optional field and not required.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:

Mail or fax to:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guarn, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301

855-587-9604

Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming

Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888

855-800-8105

855-821-0094

Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia

Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Mississippi, Missouri, Montana. Nebraska, Nevada, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands.

Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

855-298-1145

Maine, Massachusetts, New Hampshire, New York, Pennsylvania, Vermont

the U.S. Virgin Islands,

A.P.O. or F.P.O. address

Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999

855-821-0094

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

 $\mbox{\bf Line 3.}$ Enter your current address. If you use a P.O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.

Line 5b. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number should not contain an SSN.

Completion of this line is not required.

Note. If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "999999999" on the transcript.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nortax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service Tax Forms and Publications Division 1111 Constitution Ave. NW, IR-6526 Washington, DC 20224

Do not send the form to this address. Instead, see Where to file on this page.