JACKSON PARISH BANK 201 JIMMIE DAVIS BLVD. • P. O. BOX 640 JONESBORO, LOUISIANA 71251 PHONE (318) 259-4400 • FAX (318) 259-4440

| NOTE: ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU | J |
|---|---|
| DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYMENT OF THIS OBLIGATION APPLIED FOR | ł |

| | CC | DNSUMER | CREDI | T APPL | ICATIO | ON | | | | | |
|--|---|-----------------------|---------------|--|--|---------------|----------------|--------------------------------|--------------------------|--|--|
| | | - relying solely upor | n my income | | | ssets from o | ther sour | | JOINT CREDIT | | |
| | | | | Assets as well as income or assets from other sources. CO-APPLICANT Complete only if: for joint credit, for individual credit relying on income or assets from other sources, or applicant is married and resides in a community property state. | | | | | | | |
| NAME (Last, First, Middle) | | | | AME (Last, First | i, Middle) | applicant | i is marrieu a | | innunity property state. | | |
| BIRTHDATE TELEPHONE NO. DRIVER'S LICENSE NO. | | | BI | BIRTHDATE TELEPHONE NO. DRIVER'S LICENSE NO. | | | | | NSE NO. | | |
| SOCIAL SECURITY NO. NO. DEF | PENDENTS A | AGES OF DEPENDEN | rs so | DCIAL SECURI | L TY NO. | NO. DEPE | INDENTS | AGES OF D | EPENDENTS | | |
| ADDRESS (Street, City, State & Zip) | PARISH | AE | DRESS (Street | t, City, State & | & Zip) | | | PARISH | | | |
| | Years at Present Address | | | Years at P Address | | | | | | | |
| PREVIOUS ADDRESS (Street, City, State & Zip) PARISH | | | PF | | | Own Rent | | | | | |
| (Complete if less than two years at present address) | | | ` | (Complete if less than two years at present address) | | | | | | | |
| Years at This Address | | | _ | | | | | | Address | | |
| EMPLOYER (Company Name & Address) | | Own | | IPLOYER (Com | npany Name i | & Address) | | [| Own Rent | | |
| | | | | | | | | | | | |
| HOW LONG BUSINESS PHONE | POSITION C | DR TITLE | НС | HOW LONG BUSINESS PHONE POSITIC | | | | ON OR TITLE | | | |
| SUPERVISOR OR HRD | NATURE OF | BUSINESS | SU | SUPERVISOR OR HRD NATURE OF | | | | OF BUSINES | OF BUSINESS | | |
| SALARY PER MONTH | SALARY PER MONTH Is this income likely to be reduced before the credit requested is | | | | SALARY PER MONTH Is this income likely to be re before the credit requested | | | | | | |
| GROSS: \$ NET: \$ paid off? | | | GF | GROSS: \$ NET: \$ paid off? | | | | | | | |
| SOURCES OF OTHER INCOME PER MONTH | | | | _ SOURCES OF OTHER INCOME PER MONTH | | | | | | | |
| NAME, ADDRESS & PHONE OF NEAREST RELATIVE NOT LIVING WITH YOU | | | N/ | NAME, ADDRESS & PHONE OF NEAREST RELATIVE NOT LIVING WITH YOU | | | | | WITH YOU | | |
| | | | | | | | | | | | |
| | G | UARANTO | RS OF | | RSER | S | | | | | |
| NAME (Last, First, Middle) | | | | | | | | | | | |
| BIRTHDATE TELEPHONE NO. DRIVER'S LICENSE NO. SOCIAL SECURITY NO. NO. DEPENDENTS AGES OF DEPEN | | | | | | DEPENDENTS | | | | | |
| ADDRESS (Street, City, State & Zip) | | | | PARISH | | | F | /ears at Present Address | □ Own □ Rent | | |
| PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than two years at prese | | | | nt address) PARISH | | | ۲ F | lears at Present Address | □ Own □ Rent | | |
| EMPLOYER (Company Name & Address) | | | | | | | | | | | |
| BUSINESS PHONE | E POSITION OR TITLE | | | | SUPERVISOR OR HRD NATURE OF BUSINESS | | | | | | |
| SALARY PER MONTH | | | | Is this income likely to be reduced before the credit requested is paid off? | | | | | | | |
| GROSS: \$ SOURCES OF OTHER INCOME | NET: \$ | | | | | piaiii | | | | | |
| NAME, ADDRESS & PHONE OF NEARES | T RELATIVE N | OT LIVING WITH YOU | | | | | | | | | |
| MARITAL STATUS Complete only if: for joint or secured credit, or applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested. | | | | | | | | | | | |
| APPLICANT 🗌 Marri | ed | Separate | ed | 🗌 Unr | married (incl | luding single | , divorce | d, and widow | , | | |
| CO-APPLICANT Married Separated Unmarried (including single, divorced, and widowed) LOAN INFORMATION (Office Use Only) | | | | | | | | | | | |
| LOAN AMOUNT NO. OF MO | | RENEWED MONEY | / M | ONTHLY PAYME | | FIXED RATE | | | AYMENT DATE | | |
| \$ LOAN PURPOSE | | | \$ FE | D. CLASS | % PURPOSE CODE CO | | | DLL. CODE | | | |
| DESCRIPTION OF COLLATERAL | | | | | | | | | | | |
| | | | | | | | | | | | |

| BANK | | ORMATION | | | | | | | |
|--|--|--|---|-----------------------------------|--|----|--|--|--|
| BANK NAME | | | | | | | | | |
| | | | | D (77) | | | | | |
| CHECKING ACCOUNT NUMBER | | BALANCE \$ | | DATE OPE | ENED | | | | |
| SAVINGS ACCOUNT NUMBER | BALANCE \$ | | DATE OPE | ENED | | | | | |
| SAVINGS ACCOUNT NUMBER | BALANCE | | DATE OPE | ENED | | | | | |
| | ACTIVE | | 2414402 | | | | | | |
| ACCOUNT NUMBER | PAYMENT \$ | AMOUNT | BALANCE \$ | | ORIGINATION DATE | | | | |
| ACCOUNT NUMBER | PAYMENT \$ | AMOUNT | BALANCE \$ | | ORIGINATION DATE | | | | |
| AS | SETS | LISTING | | | | | | | |
| REAL ESTATE (Type, Location) | | | | ESTIMATE | ED VALUE | | | | |
| FINANCED BY | | | MORTGAGE BALANO | \$ CE | MONTHLY PAYMENTS | | | | |
| PRINCIPAL AUTOMOBILE (Make, Model, Year) | | | Ψ | | Ŷ | | | | |
| FINANCED BY | | | MORTGAGE BALANO | CE | MONTHLY PAYMENTS | | | | |
| | | | \$ | | \$ | | | | |
| Have you ever adjudicated a bankruptcy, made a settlemer proceedings against you? | nce Paym | ents? | /es □ No Amount Per Mont | | | | | | |
| S | IGNA | TURES | | | | | | | |
| I certify by my signature below that the statements and ir authorize Jackson Parish Bank to verify information, and th parties. This offer is subject to the credit policies of the Ba not the loan is granted. If this is a joint application, the un- from this time. I further agree that as long as my relation wi at the Bank's request. | at credit r ank. I agr dersigned | eferences or verifice ee that the applica d shall be jointly a | cation may be give ation shall remain nd severally liable | en based the Bank for any a | on inquiries from other 's property whether or and all credit extended | | | | |
| Applicant's Signature | Date | Co-Appli | cant's Signature | | Date | | | | |
| | | | | | | | | | |
| LOAN COMMITTE | E/LO | AN OFFICE | R DECISIO | Ν | | | | | |
| | | | Diak Data | | | | | | |
| LOAN OFFICER: Total Monthly Total Monthly | | | | | | | | | |
| Total Monthly Total Monthly Notes: \$ Net Income: \$ | | _ Before Loan: | ¢ | % After Lo | oan: | _% | | | |
| Loan Officer's Comments: | | | | | | | | | |
| | | | | | | | | | |
| Approved: | <u> </u> | Denied:_ | | | | | | | |
| Conditions: | | | | | | | | | |
| LOAN COMMITTEE: | | | | | | | | | |
| William Jimmerson | Billy Mo | Donald | | Mich | nael McDonald | | | | |
| JoAnn Teat | Woody McDonald | | | | Mel Cohen | | | | |