

ASSETS AND LIABILITIES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

Assets		Liabilities		
Checking and Savings Accounts		Name and Address of Creditor		
Name & Address of Institution	Cash or Market Value	Name & Address of Company	Payment	Balance
Acct. No.	\$	Acct. No.	\$	\$
Name & Address of Institution	Cash or Market Value	Name & Address of Company	Payment	Balance
Acct. No.	\$	Acct. No.	\$	\$
Name & Address of Institution	Cash or Market Value	Name & Address of Company	Payment	Balance
Acct. No.	\$	Acct. No.	\$	\$
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Acct. No.	\$	Acct. No.	\$	\$
Name & Address of Institution	Cash or Market Value	Name & Address of Company	Payment	Balance
Acct. No.	\$	Acct. No.	\$	\$
Name & Address of Institution	Cash or Market Value	Name & Address of Company	Payment	Balance
Stocks and Bonds Assets		Name & Address of Company	Payment	Balance
Number	Description	Cash or Market Value		
		\$		
		\$		
		\$	Acct. No.	\$
		\$	Name & Address of Company	Payment
		\$		Balance
Life Insurance - Face Value		\$		
Real Estate Owned Assets		\$		
Vested Interest in Retirement Funds		\$		
Net Worth of Business Owned		\$	Acct. No.	\$
			Name & Address of Company	Payment
				Balance
Automobiles Owned:		Name & Address of Company	Payment	Balance
Year	Make and Model	Cash or Market Value		
		\$		
		\$		
		\$	Acct. No.	\$
		\$	Name & Address of Company	Payment
				Balance
Other Assets Owned:				
Description		Cash or Market Value		
		\$		
		\$	Acct. No.	\$
		\$	Alimony/Child Support/Separate Maintenance Owed to	\$
		\$		
		\$	Job Related Expense	\$
		\$		
		\$		
LIQUID ASSETS		\$	TOTAL MONTHLY PAYMENTS	\$
TOTAL ASSETS		\$	TOTAL LIABILITIES	\$
NET WORTH		\$		

**** indicates obligations satisfied at or before loan closing.

INTERVIEWER INFORMATION ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

INTERVIEWER INFORMATION

Originator Name

Phone Number

Ext.

Originator NMLSR Identifier

Originator License State and Number

Company Name

Company NMLSR Identifier

Company License State and Number

Company Address (street, city, state, ZIP)

eCommunication (E-SIGN) Disclosure and Consent

I/We may consent to receiving electronic account statements, loan application, disclosures, billing statements, notices, loan documents, and other Bank documents (collectively the "Documents") in a Portable Document Format (PDF) to one or multiple email addresses. This electronic document delivery service replaces the creation of paper Documents and their delivery through land-based mail services. All Documents can be made available to you in printed form by calling 785-364-4691 or 888-362-4691. A nominal fee may be imposed for high volume requests. Additionally, your consent will apply to subsequent Documents that we are required or otherwise choose to provide from time to time.

Email Addresses. Electronic communications will be sent to the email address that you or any co-applicant provided in your application, and you agree to forward disclosures to all other applicants. If an email is returned as undelivered, we may use any other email address that we have for you or a co-applicant. We also reserve the right to use postal addresses. You must notify us of any change in your email address by calling 785-364-4691 or 888-362-4691 or emailing fsbcomp@fsbks.com. Unless otherwise required by law, you agree that any electronic communications will be deemed received by you when sent by means set forth above. In accordance with our privacy practices, your email address will not be shared or sold.

Withdrawal of Consent. You may withdraw your consent to receiving electronic communications by calling 785-364-4691 or 888-362-4691 or emailing fsbcomp@fsbks.com. Withdrawal by any one co-applicant will be effective for all applicants. Any withdrawal of your consent to receive electronic communications will be effective only after we have a reasonable period of time to process your withdrawal. You will not be charged a fee for your withdrawal of consent. At our option, we may treat your provision of an invalid email address as a withdrawal of your consent to receive electronic communications. Your access and use of other electronic communications may be terminated.

Consent Coverage; Notices from You Are Not Covered. Applicable laws or contracts sometimes require you to give us "written" notices, and your consent herein does not relate to those items. In order to coordinate our processing, you must still provide us notice on paper.

Copies. You may print or make a copy of any electronic communications that are emailed to you.

System Requirements. In order to properly access and retain your electronic communications, you must have the following hardware and software (collectively, "System Requirements"):

- A device capable of accessing the Internet and sending and receiving email
- Internet access
- An Active email address
- A Current Version of a program that reads and displays PDF files (such as Adobe Acrobat Reader)
- A printer capable of printing copies of information for our records (if you desire paper records)

I/We **consent** to receiving electronic communication from The Farmers State Bank.

Borrower Signature

Date

E-Mail Address

OR

I/We **do not consent** to receive electronic communication from The Farmers State Bank.

Borrower Signature

Date

INSURANCE DISCLOSURE FOR CREDIT APPLICATION

Applicant:

Lender:

The Farmers State Bank
209 Montana Avenue
PO Box 465
Holton, KS 66436-0465
(888) 362-4691

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.

1. 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.

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

APPLICANT:

X _____
Applicant Date

ACCEPTABLE INSURANCE

In order for insurance to be accepted, the following Key items must be shown on the insurance document:

- Name of Insured
- Comprehensive and Collision Coverage with deductibles not to exceed \$500.00
- Effective Date of Coverage
- Year, Make, and Vehicle Identification Number
- Borrower Can Not be excluded on the policy
- BANK MUST BE LISTED AS "LOSS PAYEE" (LIENHOLDER)

If a Certificate of Insurance has been added to a loan, the following information is required in order to cancel a certificate that has been added to the Borrowers loan:

- Declarations Page Only showing key information above.
- Letter from the agent showing all the key information above and MUST BE SIGNED BY THE AGENT.

COMPUTER PRINTOUT FROM AGENCY IS NOT ACCEPTABLE INSURANCE TO CANCEL AN EXISTING CERTIFICATE, UNLESS ALL THE INFORMATION ABOVE IS INCLUDED AND THE PRINTOUT HAS BEEN SIGNED AND DATED BY THE AGENT.