

VISA® Business Credit Card



Controlled Spending

Manage your company's cash flow conveniently and efficiently with a VISA® Business Card. Its flexibility allows you to preset spending limits for each employee cardholder. Online account information helps you monitor available funds 24/7. Detailed monthly statements and reports itemize your business expenditures to help you track expenses and prepare for tax season.

Secure Transactions

Fraud monitoring helps detect suspicious activity early. Visa® Zero Liability protects against unauthorized card use and grants provisional credit.

Worldwide Acceptance

The Visa® Business Card gives you international buying power. Use it everywhere Visa® is accepted. Purchase office equipment, order supplies online or dine with clients.

Premium Services*

Protect your business with the following Visa® Business Card services:

- Purchase security
- Extended warranty protection
- Auto rental insurance
- Travel and emergency services
- Travel accident insurance up to \$150,000
- AutoPay program
- Online access at mycardstatement.com
- Visa® Zero Liability
- Visa® Liability Waiver

*Certain restrictions and limitations apply. See the Visa Business Benefits Package for complete details.

Check YES on application to enroll in ScoreCard Rewards and earn one point for every dollar spent, redeemable for exciting gift and travel packages!



- Please print **ALL PAGES** of this document.
- Each applicant should complete the application and sign.
- The signed application should be mailed to:
Bankers' Bank of Kansas Service Center
P.O. Box 20810
Wichita, KS 67208-6810
- **OR**, use the prepaid business reply envelope. Please follow the supplied directions to prevent papers from separating during transit. Remember to tape the business reply envelope closed.
- Applicant should keep the Important Disclosures for the rates, fees or terms associated with this program.
- Applicant should keep this page as an overview.

KEEP THIS PAGE.
Include it when mailing your application.

VISA Business Card Application



Check to opt in for Business ScoreCard Rewards

Credit limit requested: \$ _____

Name of business as you would like it to appear on card (Limit 24 spaces)

Check business type (only one) and submit items listed

- | | | | |
|-----------------------------------------|-----------------------------------------|----------------------------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Non-profit or Government |
| ____ Letter of reference from your bank | ____ Letter of reference from your bank | ____ Letter of reference from your bank | ____ Letter of reference from your bank |
| ____ Full year financials | ____ Full year financials | ____ Full year financials | ____ Full year financials |
| | | | ____ Finance committee minutes
(including authorization to issue credit cards) |

Business Name _____ Tax ID# _____
 Business Address _____ City _____ State _____ Zip Code _____
 Phone Number _____ Cell Number _____
 Nature of Business _____ Date Business Established _____
 Email Address _____ Website _____

Issue Business Credit Cards to the Following Individual Applicants

Name (please print)	Signature	Individual Credit Line Requested
1. _____	X _____	\$ _____
2. _____	X _____	\$ _____
3. _____	X _____	\$ _____

Attach additional sheet if necessary (with signature and credit line requested).

Credit Information

Bank Name _____ Address _____
 City _____ State _____ Zip Code _____ Bank Phone Number _____
 Bank Officer _____
 Acct. # _____ Avg. Acct. Balance YTD _____
 Trade References _____

Authorizing Officer's Information

Position with Business (check one) President VP Treasurer Owner Partner Member Other
 First Name _____ MI _____ Last Name _____ # Years with Business _____
 Home Address _____ City _____ State _____ Zip Code _____
 Date of Birth _____ Social Security # _____ Home Phone # _____

Attach additional sheet if necessary (with signatures).

Business account balances are due and payable in full each month upon receipt of credit card statement.

AUTOMATIC PAYMENT OPTION: If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to you.

PLEASE READ CAREFULLY BEFORE SIGNING: This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be made to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, Wichita, KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the **Business Card Agreement**, a copy of which will be mailed to the business applicant if credit is granted. Receipt of such agreement and acceptance of such terms to be conclusively presumed by business' use. If this is a joint business application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. I/We hereby certify and warrant that the statements made by me/us in this certificate are true and correct and that I/we have read the Important Disclosures in this application.

I/We certify that this business does not engage in Internet gambling pursuant to the Unlawful Internet Gambling Enforcement Act of 2006 as stated in the Disclosures.

We intend to apply for joint credit. Initials _____ and _____ .

X _____
Signature of Owner or Authorizing Company Officer Date _____

X _____
Signature of Owner or Authorizing Company Officer Date _____

Name of employee who helped you:

Bank ID# 783

VISA® BUSINESS CARD IMPORTANT DISCLOSURES

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases	10.92% ¹
Other APRs	Cash Advance APR 18% ² Default Rate 18% ³
Variable Rate Information	Your APR may vary. The rate is determined on the last day of each month by adding 6.92% to the "Prime Rate." ¹
Grace Period for Purchases	25 Days ⁴
Method of Computing the Balance	Average Daily Balance including New Purchases. ⁵
Annual Fees	\$25.00 for each card. ⁶
Transaction Fee for Cash Advance	\$5.00 or 2% of the amount of each advance, whichever is greater.
Late Payment Fee	\$25
Overlimit Fee	\$25
Return Check Fee	\$25

Business account balances are due and payable in full each month upon receipt of credit card statement.

As of the date this application was designed (shown below) the information listed was accurate. Because rates and terms are subject to change, you may contact us for current information by writing to us at **P.O. Box 20810, Wichita, KS, 67208-6810.**

¹ The Prime Rate used to determine your **ANNUAL PERCENTAGE RATE** is the Rate published in the Wall Street Journal under the "Money Rates" subsection on the last business day of the month. If the closing date of the billing cycle is not a business day, then the first business day following the closing date of the billing cycle is used.

² **A Finance Charge** will be imposed on cash advanced from the date made, or from the first day of the billing cycle in which the cash advance is posted to your account, whichever is later, and will continue to accrue on the unpaid average daily balance of such cash advances until the date of payment if paid during the same billing cycle, or until the closing date of the billing cycle, or until the closing date of the cycle preceding the date on which the entire New Balance is paid in full or until the date of payment if more than 25 days from the closing.

³ If your account is or becomes more than 60 days past due at any time, or is otherwise in default in regard to any provision of the **Visa Business Card Agreement**, we may immediately increase the rate to a "Monthly Periodic Rate" of 1.500% (which is a corresponding ANNUAL PERCENTAGE RATE of 18%) effective with the first day of the next billing cycle of your account.

⁴ **A Finance Change** will be imposed on Credit Purchases only if you do not pay the entire New Balance shown on your monthly statement for the previous billing cycle within 25 days from the closing date of that statement and a late fee will be charged.

⁵ **The Finance Charge** for a billing cycle is computed by applying the Monthly Periodic Rate to the average daily balance of Credit Purchases, which is determined by dividing the sum of the daily balances during the billing cycle by the number of days in the cycle. Each daily balance of Credit Purchases is determined by adding to the outstanding unpaid balance of Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account, and subtracting any payments as received and credits as posted to your account, but excluding any unpaid **Finance Charges**.

⁶ See Business Cardholder Agreement for alternatives to avoid said Annual Fee.

Unlawful Internet Gambling Enforcement Act of 2006

Transactions restricted by the Unlawful Internet Gambling Enforcement Act of 2006 are prohibited from being processed through this commercial account. You agree that such transactions will not be conducted through your account, and that you will notify Bankers' Bank of Kansas (BBOK) should your account be used for Internet Gambling of any kind. Please be advised that should Bankers' Bank of Kansas discover your account being used for such restricted transactions, we may terminate your access to certain payment systems and/or close your account.

The Visa Business Card Agreement should be reviewed for all conditions and terms.

BBOK is card issuer.