

Credit Card Application



Community Financial Services Federal Credit Union

	Cards Of			with rewards, Gold with			
				t be available in your a			
Арр	olicant Info	ormatic	on Co-Applicant Information				
First Name	Initial	Last Nam	e	First Name	Initial	Last Name	
Social Security Number Da		Date of B	irth	Social Security Number		Date of Birth	
Home Phone Number	Work Phone		Monthly Mortgage	Home Phone Number	Work Phone		Monthly Mortgage
Current Street Address Apt		Apt. No.	Since (Year)	Current Street Address		Apt. No.	Since (Year)
City		State	Zip	City			Zip
Current Employer			Hire Date	Current Employer			Hire Date
Position	Employer Ad	dress		Position	Employer Ad	Employer Address	
Monthly Gross Income Ar		Annual He	ousehold Income	Monthly Gross Income		Annual Household Income	
\$		\$		\$		\$	
			Balance Tra	nsfer Request			
	-			the balance(s) on the credit			-
credit card. (Please send a copy of your last stateme Creditor Name		Account Number		Exact Amount to Pay			
Payment Mailing Address							
Creditor Name		Account Number		Exact Amount to Pay			
Payment Mailing Address							
Creditor Name		Account Number		Exact Amount to Pay			
Payment Mailing Address			L				
		SIGNING	This statement is a	ibmitted to obtain gradit and	/ wo cortify the	t all inform	ation boroin
is true and complete. I / v based on inquiries from of and conditions of the cred such agreement and acce undersigned shall be joint Services FCU a lien and s	ve agree that in ther parties. Th lit union card ag eptance of such ly and severally security interest	quiries may is offer is s reement, a terms to be liable for a on all pres	be made to verify info ubject to the credit po copy of which will be conclusively presum ny and all credit exter ent and future shares	ubmitted to obtain credit and ormation and that credit refe- licies of this institution. I / w mailed to the applicant if this ed by the applicant's use. If nded from time to time. I / we in my / our name to secure to e see reverse side for addition	rences or verific e agree to be bo application is g this is a joint ap e agree to give 0 he prompt paym	ation may b bund by the granted, rec plication, th Community	be given terms reipt of ne Financial
performance of my/our ob			ia agreement. Fiedst				

Applicant's Signature	Date	Co-Applicant's Signature	Date