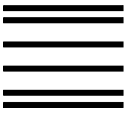
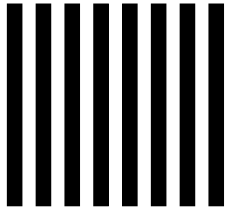


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IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you, when you apply for or open an account, we will ask for your name, address, birthdate and other information that will allow us to identify you. We may also ask to see your Driver's License or other identifying documents.

APPLICANT Note: All sections should be filled out completely to avoid delay in processing your application.

Last Name		First	Middle	Social Security #			
Birthdate	# of Dependents	Home Phone		<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Other	Monthly Payments \$
Current Address		City	State	Zip Code	How Long? (yrs.)		
Mailing Address (if different from above)		City	State	Zip Code	How Long? (yrs.)		
Previous Address (if less than two years at present address)		City	State	Zip Code	How Long? (yrs.)		
Employer	Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone		Date Employed			
Address		Position/Occupation		Monthly Gross Income \$			
Name and Address of Previous Employer (If less than two years at present employer)							
Source of Additional Income: Income from Alimony, child support or spouse maintenance need not be revealed if it is not to be considered in determining creditworthiness							
Nearest Relative (Not Living With You)							
Their Address		City	State	Zip Code	Relationship		

CO-APPLICANT Information about a co-applicant is not required for an individual account.

Last Name		First	Middle	Social Security #			
Birthdate	# of Dependents	Home Phone		<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Other	Monthly Payments \$
Current Address		City	State	Zip Code	How Long? (yrs.)		
Previous Address (if less than two years at present address)		City	State	Zip Code	How Long? (yrs.)		
Employer	Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Work Phone		Date Employed			
Address		Position/Occupation		Monthly Gross Income \$			

CREDIT INFORMATION Attach Additional Sheet if Necessary

Name and Address of Creditor	Name Under Which Account is Carried	Account Number	Balance	Monthly Payment
1. Home Mortgage/Rent			\$	\$
2. Bank Credit Card Name and Address			\$	\$

CREDIT DISCLOSURES

Annual Percentage Rate (APR) for Purchases Cash Advances, Balance Transfers	6.5% for 6 months then variable. VISA® Gold 6% + Prime VISA®/MasterCard® 7% + Prime
How to avoid paying interest on purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on purchases if you pay your entire balance by the due date (Grace Period) each month.
Method for computing the balance for purchases	Average Daily Balance (including new purchases)
Annual Fees	None
Transaction Fee for Cash Advances	3% of the amount advanced \$5 minimum - \$25 maximum
Late Payment Fee	\$15 at 10 days late
For Credit Card Tips from the Federal Reserve Board	To learn more about factors to consider when applying for or using a credit card, visit the website of the Federal Reserve Board at http://www.federalreserve.gov/creditcard .

DEBT PROTECTION - INITIAL TO ENROLL

YES, please enroll me in the Debt Protection Program for my credit card. I understand this program is optional and my decision to purchase or not purchase the program will not affect my application or my eligibility for credit. I also understand that I am free to cancel the program at any time. I have read the Summary of Protection for the Debit Protection Program contained in this agreement and authorize the fee to be billed to my credit card during each month that I carry a balance on the card. **Terms and conditions available upon request.**

SIGNATURE(S)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/We certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/We agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time.

Applicant Signature _____ Date _____ Co-Applicant Signature _____ Date _____

TRANSFER OF BALANCE REQUEST

Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account. Please attach a copy of your most recent statement.

Credit Card Account Number _____ Amount to be transferred \$ _____
Signature _____

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering or selling me an insurance product or annuity in connection with this extension of credit. **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT, EITHER UPON:**

- My purchase of an insurance product or annuity from you or from any of your affiliates; or
- My agreement not to obtain, or a prohibition on me from obtaining, an insurance or annuity from an unaffiliated entity

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

Consumer _____ Date _____ Consumer _____ Date _____

AT THE DATE THIS APPLICATION WAS PRINTED (SHOWN IN THE LOWER RIGHT-HAND CORNER — THIS SIDE) THE INFORMATION LISTED ABOVE WAS ACCURATE. BECAUSE RATES AND TERMS ARE SUBJECT TO CHANGE, YOU MAY CONTACT US FOR THE CURRENT INFORMATION BY WRITING TO THE BUSINESS REPLY ADDRESS SHOWN ON THE REVERSE SIDE.

A finance charge will be imposed on Credit Purchases only if you elect not to 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. If you elect not to pay the entire new balance shown on your previous monthly statement within that 25-day period, a finance charge will be imposed on the unpaid average daily balance of such Credit Purchases from the previous statement closing date and on new Credit Purchases from the date of posting to your account during the current billing cycle, and will continue to accrue until the closing date of the billing 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 date. 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 the Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account and subtracting any payments as received or credits as posted to your account, but excluding any unpaid finance charges. **The APR for cash advances and balance transfers is 6.5% for six months then variable at 6% + Prime for VISA® Gold or 7% + Prime for MasterCard®/VISA®. A finance charge will be imposed on Cash Advances from the date made or from the first day of the billing cycle 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 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 date. If the new balance shown on your monthly statement for the prior billing cycle is paid in full within 25 days of the closing date of that statement, no finance charges will be imposed during the current billing cycle for Cash Advances posted to your account during previous billing cycles.**