



RESIDENTIAL LOAN PACKET

Thank you for considering Apple River State Bank and our First Community Bank of Galena branch for your banking and lending needs. As a community bank we are here to provide a wide variety of financial services, delivered in a personalized manner.

The Apple River State Bank has embraced a philosophy that places customer needs and service above everything else. The Bank's pricing of its services reflects that emphasis by its consistent policy of competitive rates and fees on all deposit and loan products. In addition, the Bank offers trust, investments, and long-term fixed rate mortgages.

At a time when the financial services industry continues to consolidate and "lose the customer in the shuffle", we've tried to never forget that a bank has the responsibility to make its decisions not just with the bank's interests in mind, but the interests of our customers.

To start the loan process,

1. Electronically complete the forms in this packet print them and sign the disclosures.

or

- 2. Print this packet, complete the forms by hand and sign the disclosures.
- 3. Return the completed forms to one of our six convenient locations either by mail, fax or in person. Please do not email these completed documents to the bank as they contain non-public confidential information.

After we receive your credit application it will be reviewed by one of our loan offices who will then contact you regarding your lending needs.

Once again, thank you for considering Apple River State Bank and our First Community Bank of Galena branch for your banking and lending needs where local bankers, make local decisions, meeting local needs.

		SIX LOCATION	IS – ONE BANK		
Galena	Scales Mound	Apple Biver	Warren	Elizabeth	Hanover
Galena	Scales Mound	Apple River	warren	Elizabetti	папочег
101 Exchange	510 N. Main	103 N. Main	135 E. Main	112 N. Main	215 Jefferson
815.777-6300	815.845.2900	815.594.2351	815.745.2194	815.858.2225	815.591.2201
815.777.6304	815.845.2644	815.594.2272	815.745.2216	815.858.3347	815.591.3881

Apple River State Bank & First Community Bank of Galena

Real Estate Loan Application Required Items Check List

Customer:		
Property Address:		
City, State & Zip:		
REQUIRED	ITEMS	COMPLETED
	REFINANCE	
	Application Completed in Detail	
	Signed Borrower's Authorization	
	Reg B – Joint Credit Disclosure	
	Insurance Fed Disclosure	
	Servicing Disclosure	
	4506T Form	
	Last 30 days of Pay Stubs	
	1 Year of W-2 Forms	
	Most Recent Bank Statements	
	Most Recent Investment Statements	-
	Copy of Title Insurance Policy	
	If Self Employed:	
	2 Years of Complete Tax Returns/Signed	
	*Additional documents need to be signed with loan officer.	
	If Applicable:	
	Social Security Award Letter	
	Pension Award Letter	
	Divorce Decree	
	PURCHASE	
	In Addition to Above Items	
	Copy of Signed Purchase Contract	
	Copy of IL Residential Prop. Disc	
	Relocation Contract	-
	Gift Letter	
	Landlord Name, Address, Phone	
	Copies of Leases on Rental Properties	
	Blue Prints, Plans, Specs (New Const.)	
	If Selling Home:	
	Copy of Sales Contract	
	Copy of HUD Settlement Statement	
Comments:		

NOTICE OF YOUR FINANCIAL PRIVACY RIGHTS

We, our, and us, when used in this notice, mean Apple River State Bank.

This is our privacy notice for our customers. When we use the words "you" and "your" we mean the following types of customers:

- Our consumer customers who have a continuing relationship by purchasing or holding financial products or services such as a(n):
- Deposit account
- Loan account
- Safe deposit box
- Self-directed Individual Retirement Account
- Financial, investment, or economic advisory services
- Former customers

We will tell you the sources of the information we collect about you. We will tell you what measures we take to secure that information.

We first define some terms.

Nonpublic personal information means information about you that we collect in connection with providing a financial product or service to you. Nonpublic personal information does not include information that is available from public sources, such as telephone directories or government records. Hereafter, we will use the term "information" to mean nonpublic personal information as defined in this section.

An **affiliate** is a company we own or control, a company that owns or controls us, or a company that is owned or controlled by the same company that owns or controls us. Ownership does not mean complete ownership, but means owning enough to have control.

A **nonaffiliated third party** is a person we do not employ or a company that is not an affiliate of ours. This is also known as nonaffiliated third party, or simply, an "other party."

THE INFORMATION WE COLLECT

We collect information about you from the following sources:

- Information you give us on applications or other forms
- Information about your transactions with us
- Information about your transactions with other parties
- Information from a consumer reporting agency
- Information we receive through our Customer Identification Program

INFORMATION WE DISCLOSE ABOUT YOU

We do NOT disclose any information about you to anyone, except as permitted by law. Examples of this might include disclosures necessary to service your account or prevent unauthorized transactions.

THE CONFIDENTIALITY, SECURITY, AND INTEGRITY OF YOUR INFORMATION

We restrict access to information about you to those employees who need to know that information to provide products or services to you. We maintain physical, electronic, and procedural safeguards to protect this information.

INFORMATION ABOUT FORMER CUSTOMERS

We have the same policy about disclosing information about former customers as we do about current customers.

Apple River State Bank

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www.communitybankgalena.com

www.appleriverstatebank.com

Borrower's Signature Authorization

Borrowers(s) Name and Address:	Lender name and Address: First Community Bank of Galena A Branch of Apple River State Bank 9816 Route 20 West Galena IL 61036
Subject Property Address:	Lender Contact: Loan Department
	Lender Phone Number: (815) 777.6300
Loan Number:	Date:
Borrower Au	uthorization
I hereby authorize the Lender to verify my past and accounts, stock holdings and any other asset balance application. I further authorize the Lender to order a information, including past and present mortgage are of this form will also serve as authorization.	ces that are needed to process my mortgage loan consumer credit report and verify other credit
The information the Lender obtains is only to be use mortgage loan.	ed in the processing of my application for a
Dawawa	Dete
Borrower	Date
Co-Borrower	Date

The Borrower and/or Co-Borrower have applied for a HUD/FHA loan. The following "NOTICE TO BORROWERS" is required for HUD/FHA loan applications using the blanket authorization form.

NOTICE TO BORROWERS: This is notice to you as required by the Right to Financial Privacy Act of 1978 that HUD/FHA has a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to HUD/FHA without further notice or authorization but will not be disclosed or released by this institution to another Government Agency or Department without your consent except as required or permitted by law.



(Rev. January 2010)

Department of the Treasury Internal Revenue Service

Request for Transcript of Tax Return

▶ Request may be rejected if the form is incomplete or illegible.

OMB No. 1545-1872

1a	Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return. 2b Second social security number if joint tax re 3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code 4 Previous address shown on the last return filed if different from line 3 5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information. 6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one number per request. 7 Transcript information in the information of the line liens of a tax return as filed with the IRS. A tax return transcript close not reflect or the state of the party in the IRS of the state of the party and returns processed during the prior 3 processing years. Mort 1120L, and Form 1120S. Return transcripts are available for the columbia or the information on the financial status of the account, such as payments made on the account, such as payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted tax payments. Account transcripts are valuable for more transmitted transcript that includes data for the second, valuable to the payment of the payment of the payment of the pay		2b Second social security number if joint tax return
3 (Current name, address (including apt., room, or suite no.), city, state, and ZIP co	de
4 F	revious address shown on the last return filed if different from line 3	
5 li	the transcript or tax information is to be mailed to a third party (such as a morted not telephone number. The IRS has no control over what the third party does with	gage company), enter the third party's name, address, th the tax information.
		ine 6 and line 9 before signing. Sign and date the form once you
	number per request. ► Return Transcript, which includes most of the line items of a tax return as changes made to the account after the return is processed. Transcripts are Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1	filed with the IRS. A tax return transcript does not reflect only available for the following returns: Form 1040 series, 120S. Return transcripts are available for the current year
b	assessments, and adjustments made by you or the IRS after the return was file	d. Return information is limited to items such as tax liability
С		adjustments to the account. Available for current year and
7		
8	these information returns. State or local information is not included with the F transcript information for up to 10 years. Information for the current year is generated by Episcope to Episcope the Episcop	orm W-2 information. The IRS may be able to provide this erally not available until the year after it is filed with the IRS. the IRS until 2009. If you need W-2 information for retirement
9	years or periods, you must attach another Form 4506-T. For requests relati	
informatter	ation requested. If the request applies to a joint return, either husband or wife respectively, at a partner, executor, receiver, administrator, trustee, or party other than	must sign. If signed by a corporate officer, partner, guardian, tax the taxpayer, I certify that I have the authority to execute v, this form must be received within 120 days of signature date. Telephone number of taxpayer on
Sian	Signature (see instructions)	Date
	Title (if line 1a above is a corporation, partnership, estate, or trust)	
	Spouse's signature	Date

Form 4506-T (Rev. 1-2010)

General Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different RAIVS teams, send your request to the team based on the address of your most recent return.

Automated transcript request. You can call 1-800-829-1040 to order a transcript through the automated self-help system. Follow prompts for "questions about your tax account" to order a tax return transcript.

Chart for individual transcripts (Form 1040 series and Form W-2)

and Form w-2)	
If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Florida, Georgia, North Carolina, South Carolina	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362
	770-455-2335
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or	RAIVS Team Stop 6716 AUSC Austin, TX 73301
A.P.O. or F.P.O. address	512-460-2272
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington,	RAIVS Team Stop 37106 Fresno, CA 93888
Wisconsin, Wyoming	559-456-5876
Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Pennsylvania,	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999
Rhode Island, Vermont, Virginia, West Virginia	816-292-6102

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to the "Internal Revenue Service" at:

Alabama, Alaska, Arizona, Arkansas. California, Colorado, Florida, Hawaii, Idaho, Iowa. Kansas. Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico. North Dakota. Oklahoma, Oregon, South Dakota. Tennessee, Texas, Utah. Washington. Wyoming, a foreign country, or A.P.O. or F.P.O. address

RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

801-620-6922

Connecticut,
Delaware, District of
Columbia, Georgia,
Illinois, Indiana,
Kentucky, Maine,
Maryland,
Massachusetts,
Michigan, New
Hampshire, New
Jersey, New York,
North Carolina,
Ohio, Pennsylvania,
Rhode Island, South
Carolina, Vermont,
Virginia, West Virginia,

Wisconsin

RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250

859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) shown on the return. For example, if you are requesting

Line 6. Enter only one tax form number per

Form 1040 that includes Schedule C

(Form 1040), enter your SSN.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See Internal Revenue Code section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see *Where to file* on this page.

Regulation B Notice of Intent to Apply for Joint Credit

Lender	Applicant		
First Community Bank of Galena a branch of Apple River State Bank 101 Exchange Street P.O. Box 6006 Galena IL 61036 815.777.6300	Address: Address: City, State & Zip:		Date:Account Number:
Notice			
You intend to apply for joint cred	lit.		
Acknowledgment			
You acknowledge receipt of a co	opy of this notice on today's	date.	
Print or type Applicant Name	Applicant Się	gnature	Today's Date
Print or type Applicant Name	Applicant Sig	gnature	Today's Date

SE	RVICING DISCL	OSURE STATEMENT	
Lender First Community Bank of Galena A branch of Apple River State Bank	Borrower		Date
101 Exchange Street PO Box 6006 Galena IL 61036		Loan Number Loan	Loan Number
Property Address			
	_		
601 et seq.). RESPA gives you certa this loan may be transferred to a diffe escrow payments, if any, as well as s	in rights under Fed- rent loan servicer. ' sending any monthl	eral law. This statement des 'Servicing" refers to collectii y or annual statements, trac	cribes whether the servicing for ng your principal, interest, and king account balances, and
Servicing Transfer Information			
X We may assign, sell, or transfer	the servicing of you	ur loan while the loan is outs	tanding.
			to assign, sell, or
The loan for which you have app to sell, transfer, or assign the se		d at this financial institution a	and we do not intend
By signing below, I/we acknowledge r	receiving a copy of	this disclosure.	
Applicant	Date	Applicant	Date
Applicant	Date	Applicant	Date

Apple River State Bank - Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower," as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when \square the income or assets of a person other than the Borrower (including the Borrower's spouse) will be used as a basis for loan qualification or \square the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower				Co-Borrov														
						IORTGAG	E AND T											
Mortgage Applied for:	□ VA □ FHA	□ US	nventional DA/Rural ousing Servi		Other (expl	ain):		A	gency Case	e Numb	ber	Len	der Case Nui	nber				
Amount \$		Interest Rate		No. of Me	onths	Amortizat	ion Type:		Fixed Rat GPM	te	☐ Other (explain) ☐ ARM (type):):						
9			70	II. PROP	ERTY IN	NFORMAT	ION ANI			FLO								
Subject Property	Address (street,	city, state & ZIP)	III I III I					1 00L 0	1 20.					No. of Units			
Legal Description	on of Subject Prop	perty (attach desc	ription if ne	ecessary)											Year Built			
Purpose of Loan	☐ Purchase			Other (e	explain):			-	erty will be rimary Resi		□ Second	lary Resid	lence		Investment			
Complete this li	ne if construction	n or construction	-permanen	t loan.														
Year Lot Acquired	Original Cost			Existing Lie	ns	(a) Present V	alue of Lot	t			Cost of Improveme	nts	Total (a	ı + b)				
	\$		\$			\$				\$			\$					
Complete this li	ne if this is a refi	nance loan.				1												
Year Acquired	Original Cost		Amount	Existing Lie	ns	Purpose of	Refinance			Descr	ribe Improvements		□ made		to be made			
	\$		\$							Cost:	\$							
Title will be held	l in what Name(s)							Manner in	n which	h Title will be held			□F	ee Simple			
Source of Down	Payment, Settlen	nent Charges, and	l/or Subord	inate Financi	ng (explair	1)												
	•	2 /			0 1													
	Borro	wer			III. E	BORROWE	R INFO	RMAT	TION			C	Co-Borrow	er				
Borrower's Nam	ne (include Jr. or S	Sr. if applicable)		'			Co-Borro	ower's	Name (incl	ude Jr.	or Sr. if applicable))						
Social Security N	Number	Home Phone (incl. area code		OB (mm/dd/	уууу)	Yrs. School	Social Se	ecurity	Number		Home Phone (incl. area code)	D	OB (mm/dd/	уууу)	Yrs. School			
☐ Married	☐ Unmarried (in	clude	Dependen	ts (not listed	by Co-Bor	rower)	☐ Marri	ed	□ Unmarri	ed (inc	lude	Depende	ents (not liste	d by Bo	rrower)			
☐ Separated	single, divorce	ed, widowed)	no.		ages		☐ Separ	ated	single, di	ivorced	l, widowed)	no.			□ to be made Estate will be held in: □ Fee Simple □ Leasehold (show expiration date) yyyy) Yrs. School by Borrower) ages No. Yrs.			
Present Address	(street, city, state	, ZIP)	□ Ow	vn □ Re	ntNo.	. Yrs.	Present A	Address	(street, cit	y, state	, ZIP)	Own	□ Rent	_No. Y	rs.			
Mailing Address	, if different from	Present Address					Mailing A	Addres	s, if differe	nt from	Present Address							
If residing at pro	esent address for	less than two yea	ars, comple	te the follow	ing:													
Former Address	(street, city, state	, ZIP)	□ Ow	vn □ Re	ntNo.	. Yrs.	Former A	Address	(street, city	y, state	, ZIP)	Own	□ Rent	_No. Y	rs.			
	Borr	ower			IV.	. EMPLOY	MENT II	NFOR	MATIO	N			Co-Borro	wer				
Name & Address	s of Employer		☐ Self l	Employed	Yrs. on th	,	Na	ime & .	Address of	Emplo	yer 🗆	Self Emp	_					
						oyed in this ork/profession												
Position/Title/Ty	pe of Business	Busine	ss Phone (ii	ncl. area code	e)		Po	sition/	Γitle/Type o	of Busi	ness	Bus	iness Phone	(incl. ar	ea code)			
If employed in c	urrent position fo	or less than two y	ears or if c	currently emp	oloyed in n	ore than one	position, c	omplet	e the follow	wing:								

Borrower					EMPLOYMEN	T INF	ORMATION (cont'o	(cont'd) Co-Borrower				
Name & Address of Emplo	yer	□ Self	Employed	Dates (f	from – to)	Name	& Address of Employer		□ Self	Employed	Dates (from – to)	
				Monthl	y Income						Monthly Income	
				\$							\$	
Position/Title/Type of Busi	ness		Business			Positi	on/Title/Type of Busines	ss		Business		
			(incl. area	code)						(incl. area	code)	
Name & Address of Emplo	yer	□ Self	Employed	Dates (1	from – to)	Name	& Address of Employer		□ Self	Employed	Dates (from – to)	
•					,						, , ,	
				Monthl	y Income						Monthly Income	
Di/i/Ti/-/T			D	\$		D:4:	/Tid-/Tf Di	_		Business	\$	
Position/Title/Type of Busi	ness		Business l			Positi	on/Title/Type of Busines	SS		(incl. area		
V. MONTHLY INC					ND COMBINE	D HO	USING EXPENSE I	NFORMATI	ON			
Gross Monthly Income	Borrower		Co-Borrow	on.	Total		Combined Mo		Dwose	om#	Proposed	
Base Empl. Income*	\$	\$	CO-BOITON	ei	\$		Rent Housing Exp	spense Pres		ciit	Proposed	
Overtime							First Mortgage (P&I)				\$	
Bonuses							Other Financing (P&I))				
Commissions							Hazard Insurance					
Dividends/Interest							Real Estate Taxes					
Net Rental Income							Mortgage Insurance					
Other (before completing,							Homeowner Assn. Due	es				
see the notice in "describe other income," below)							Other:	\$				
Total	\$	\$			\$ Total						\$	
* Self Employee Describe Other Income	d Borrower(s) may	be required	-	ice: Aliı	nony, child suppo	ort, or s	tax returns and financi eparate maintenance in forrower (C) does not cl	come need not				
B/C					repaying this loan		orrower (e) does not en	noose to have n	considered	L	Monthly Amount	
B/C										9		
										,	,	
					I. ASSETS AN							
This Statement and any appl can be meaningfully and fair person, this Statement and su	ly presented on a co	mbined basi	s; otherwise,	separate S	Statements and Sch	nedules			was complete	d about a no		
ASSETS			ash or								utstanding debts, including	
Description		Mar	ket Value		,	U	,		2 /	11	stock pledges, etc. Use ale of real estate owned or	
Cash deposit toward purchase held by:		\$			n refinancing of th							
List checking and savings	accounts below				LIA	BILIT	IES		ly Payment & ns Left to Pay		Unpaid Balance	
Name and address of Bank,	S&L, or Credit Un	ion		Nar	ne and address of	Compar	ny	\$ Payment/Mo		5	5	
Acct. no.	\$											
		ion			et. no. ne and address of 0	Compar	NV	\$ Payment/Mo	nthe	9		
Name and address of Bank, S&L, or Credit Union					ne and address of v	Сотра	.,	φ i ayment/1410	nuis		,	
Acct. no. \$					t. no.							
Name and address of Bank,	S&L, or Credit Un	ion			ne and address of 0	Compar	у	\$ Payment/Mo	nths	5	;	
Acct. no.	\$			A .	ut no							
***	Ψ			Acc	t. no.					I		

				VI. ASSETS AN	D LIA	BILITIES	(cont'd)						
Name and address of Bank, S&L, or Credi		Name and addre	ss of Co	mpany		\$ Pa	yment/Months		\$				
	Ι.												
Acct. no.	\$			Acct. no.									
Stocks & Bonds (Company name/ number & description)	\$			Name and address of Company				\$ Pa	yment/Months		\$		
	Φ.			Acct. no.									
Life insurance net cash value	\$			Name and addre	ss of Co	mpany		\$ Pa	yment/Months		\$		
Face amount: \$													
Subtotal Liquid Assets	\$												
Real estate owned (enter market value	\$												
From schedule of real estate owned) Vested interest in retirement fund	\$												
Net worth of business(es) owned	\$												
(attach financial statement)				Acct. no.	C	G							
Automobiles owned (make and year)	\$			Alimony/Child S Maintenance Pa				\$					
											_		
Other Assets (itemize)	\$			Job-Related Exp	ense (ch	ild care, unio	n dues, etc.)	\$					
				Total Monthly Payments				\$					
Total Assets a.	Total Assets a. \$			Net Worth	•	\$			Total Li	abilities b.	\$		
				(a minus b)									
Schedule of Real Estate Owned (If addit	ional prop	erties are	e owned, use	e continuation sheet.)									
Property Address (enter S if sold, PS if p	ending sal	e or R	Type of	Present		mount	Gross		Mortgage		rance,	Net	Rental
if rental being held for income)		•	Property	Market Value		Nortgages Liens	Rental Inco	me	Payments		& Misc.	1	come
				\$	\$		\$		\$	\$	\$		
					· ·		'			<u> </u>		\$	
												1	
			Totals	\$	s		\$		s	\$		\$	
List any additional names under which	credit has	previo		ceived and indicate a	ppropri	ate creditor	name(s) and ac	count	number(s):	Ψ		Ψ	
Alternate Name				Cre	editor Na	me				Account Nu	mber		
													_
VII. DETAILS OF TRA	NSACTI			IC ((X/))				ECLA	ARATIONS	n.		G. P.	
a. Purchase price		\$		If you answer "Yes" please use continuat						Borrow Yes N		Co-Boi Yes	
b. Alterations, improvements, repairs				a. Are there any outs	tanding	iudaments aa	ainst vou?						
a.				b. Have you been do			-	rs?					
d. Refinance (incl. debts to be paid off	-)			c. Have you had pro	perty for	eclosed upon	or given title						
				or deed in lieu the	reof in th	ne last 7 years							
e. Estimated prepaid items				d. Are you a party to									
f. Estimated closing costs				e. Have you directly loan which resulte	ed in fore	eclosure, trans					_		
g. PMI, MIP, Funding Fee				in lieu of foreclos	ure, or ju	idgment?		ne en	A loons bo				
h. Discount (if Borrower will pay)					education	nal loans, ma	nufactured (mo	bile) ł	nome loans, any				
i. Total costs (add items a through h)				improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)									

VII. DETAILS OF TRANSACTION		VIII. DECLA	ARATIONS					
<u> </u>	Borrower Co-Borro							
j. Subordinate financing	If you answer "Yes" to any que continuation sheet for explana	estions a through i, please use ation.	Yes	No	Yes	No		
k. Borrower's closing costs paid by		ent or in default on any Federal ortgage, financial obligation, bond,						
Seller	g. Are you obligated to pay a separate maintenance?	alimony, child support, or						
Other Credits (explain)	h. Is any part of the down pa	ayment borrowed?						
Y A STATE OF THE S	i. Are you a co-maker or en	dorser on a note?						
m. Loan amount (exclude PMI, MIP, Funding Fee financed)								
n. PMI, MIP, Funding Fee financed	j. Are you a U.S. citizen? k. Are you a permanent resid	dent alien?						
o. Loan amount (add m & n)	l. Do you intend to occupy residence?	the property as your primary						
p. Cash from/to Borrower (subtract j, k, l & o from i)	three years?	n m below. nip interest in a property in the last did you own—principal residence						
	(PR), second home (SH), (2) How did you hold title	or investment property (IP)? to the home—by yourself (S), SP), or jointly with another person						
	IX. ACKNOWLEDGEME	NT AND ACREMENT	(0)?					
remedies that it may have relating to such delinquency, report my account may be transferred with such notice as may be required to express or implied, to me regarding the property or the conditional those terms are defined in applicable federal and/or state laws (exceffective, enforceable and valid as if a paper version of this application and the conditional entry of	by law; (10) neither Lender nor its or value of the property; and (11) m cluding audio and video recordings) tion were delivered containing my of that any owner of the Loan, its servi-	agents, brokers, insurers, servicer y transmission of this application , or my facsimile transmission of riginal written signature. cers, successors and assigns, may	s, successors or assigns as an "electronic recor- this application contains werify or reverify any in	has made and containing a facsimil formation cor	y representat my "electron e of my signa atained in this	ion or warranty ic signature," a ature, shall be a		
Borrower's Signature	Date	Co-Borrower's Signature			Date			
X		X						
The following information is requested by the Federal Governmer and home mortgage disclosure laws. You are no trequired to fur information, or on whether you choose to furnish it. If you furnis ethnicity, race, or sex, under Federal regulations, this lender is requish to furnish the information, please check the box below. (Lenstate law for the particular type of loan applied for.) BORROWER	rnish this in formation, but are en co sh the information, please provide b uired to note the information on the der must review the above material	o a dwelling in order to monitor turaged to do so. The law p rovid oth ethnicity and race. For race, basis of visual observation and s to assure that the disclosures satis	he lender's compliance es t hat a le nder may no you may check m ore th urname if you have may fy all requirements to w	ot discrimina nan one desig de this applica- thich the lend is information	te either on t nation. If you ation in perso er is subject u	he bas is of this u do not furnish on. If you do no		
	lack or African American	Race: American India Alaska Native Native Hawaiia Other Pacific Is	an or Asian an or White		or African An	nerican		
Sex:		Sex:] Male					
Loan Originator's Signature X	Transpories (T1 co		Date	NT 1	- (:- 1 1'	12		
Loan Originator's Name (print or type)	Loan Originator Identifier		Loan Originator's Ph	one Numbe	r (ıncluding	area code)		
Loan Origination Company's Name	Loan Origination Company Id	entifier	Loan Origination Co.	mpany's Ad	ldress			

	CONTINUATION SHEET/RESIDENTIAL LOAN APPLICATION	ON .
Use this continuation sheet if you need more space to complete the Residential Loan Application. Mark B f or Borrower or C for Co-Borrower.	Borrower:	Agency Case Number:
	Co-Borrower:	Lender Case Number:

I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, et seq.

of The 18, United States Code, Section 1001, et seq.			
Borrower's Signature	Date	Co-Borrower's Signature	Date
X		X	

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 ON EITHER:**

- 1. My purchase of an insurance product or annuity from you or from any of your affiliates: or
- 2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product 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

EXDETE: © 2001 Bankers Systems, Inc., St. Cloud, MN Form INS-FED 2/15/2001

(page 1 of 1)

FACTS WHAT DOES Apple River State Bank DO WITH YOUR PERSONAL INFORMATION?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

Social Security Number and Income

Account Balances and Payment HistoryCredit History and Credit Score

When you are *no longer* our customer, we continue to share your information as described in this notice.

How?

All financial companies need to share customer's personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customer's personal information; the reasons Apple River State Bank chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Apple River Bank Share?	Can you limit this sharing?
For our everyday business purposes - such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	YES	NO
For our marketing purposes - to offer our products and services to you	NO	NO We Don't Share
For joint marketing with other financial companies	NO	NO We Don't Share
For our affiliates' everyday business purposes—information about your transactions and experiences	NO	NO We Don't Share
For our affiliates' everyday business purposes—information about your creditworthiness	NO	NO We Don't Share
For nonaffiliates to market to you	NO	NO We Don't Share

Questions?

Call (815) 777-6300 or go to www.appleriverstatebank.com

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Protect my personal information? How does Apple River State Bank collect my personal information? Why can't I limit all sharing? Pefinitions Affiliates C.	o protect your personal information from unauthorized coess and use, we use security measures that comply with deral law. These measures include computer safeguards and secured files and buildings. The collect your personal information, for example, when you Open an account or Deposit money Pay your bills or Apply for a loan Use your debit card The also collect your personal information from others, such as edit bureaus or other companies. The deral law gives you the right to limit only Sharing for affiliates' everyday business purposes information about your creditworthiness Affiliates from using your information to market to you Sharing for nonaffiliates to market to you additional ghts to limit sharing.
How does Apple River State Bank protect my personal information? How does Apple River State Bank collect my personal information? Why can't I limit all sharing? Definitions Affiliates C.	ceess and use, we use security measures that comply with deral law. These measures include computer safeguards and secured files and buildings. The collect your personal information, for example, when you Open an account or Deposit money Pay your bills or Apply for a loan Use your debit card The also collect your personal information from others, such a cedit bureaus or other companies. The deral law gives you the right to limit only Sharing for affiliates' everyday business purposes information about your creditworthiness Affiliates from using your information to market to you sharing for nonaffiliates to market to you cate laws and individual companies may give you additional
Collect my personal information? Why can't I limit all sharing? Definitions Affiliates Collect my personal information?	 Open an account or Deposit money Pay your bills or Apply for a loan Use your debit card de also collect your personal information from others, such a edit bureaus or other companies. ederal law gives you the right to limit only Sharing for affiliates' everyday business purposes information about your creditworthiness Affiliates from using your information to market to you Sharing for nonaffiliates to market to you
So rigonal Company of the Company of	 Sharing for affiliates' everyday business purposes - information about your creditworthiness Affiliates from using your information to market to you Sharing for nonaffiliates to market to you
Affiliates C	
	ompanies related by common ownership or control. They an be financial and nonfinancial companies. • First Apple River Corp.
	 ompanies not related by common ownership or control. They are be financial and nonfinancial companies. Apple River State Bank does not share with nonaffiliates so they can market to you.
	formal agreement between nonaffiliated financial companies at together market financial products or services to you.
	 Apple River State Bank does not jointly market.