



Our VISA® Platinum and Visa® Classic Credit Cards

are designed to help you manage your account sensibly.

Each card is simple, reliable, safe and easy to use with no complicated fees or rules.

Our card offers:

- A low variable rate
- No annual fee
- Free online account information
- Worldwide acceptance
- Cash advance at thousands of ATMs
- Auto rental insurance
- Automatic payment option
- Travel accident insurance coverage
- Prompt, expert service

Use your card for everyday purchases and watch your points add up quickly!

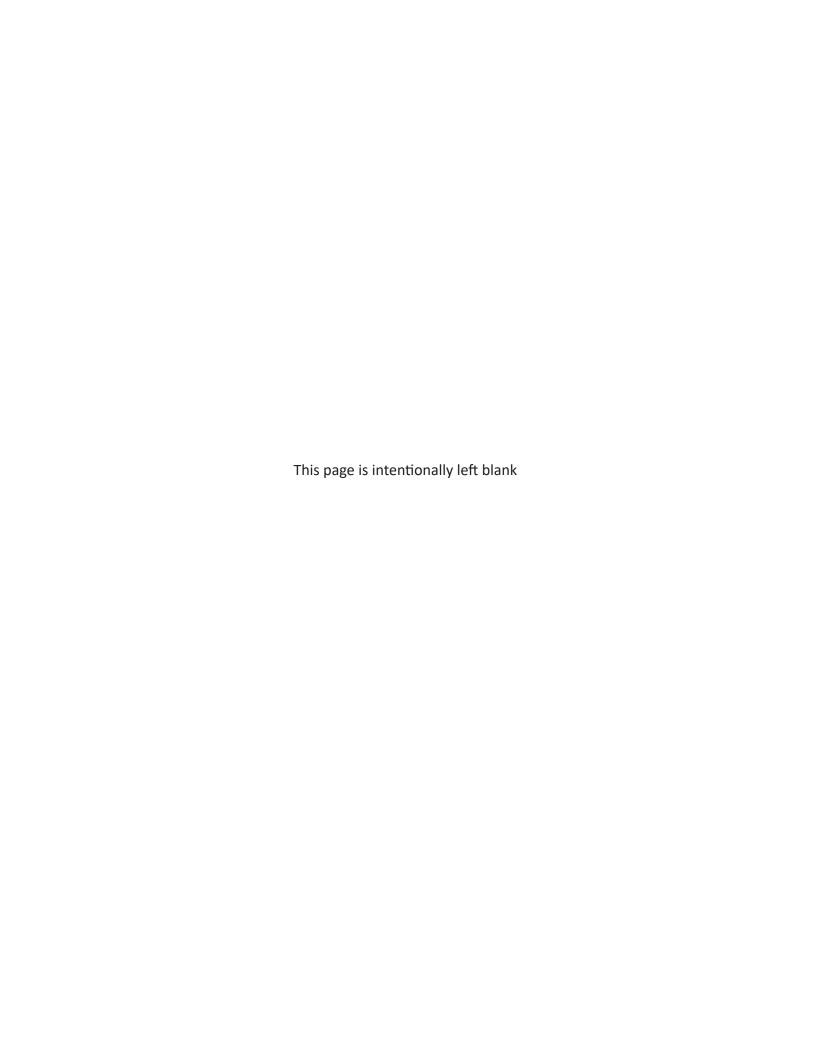
Those eligible for the VISA® Platinum Preferred Card receive additional rewards!

As a VISA® Platinum Preferred cardholder, you'll earn one point for every \$1 spent when you use your card to shop, dine, travel, pay bills and more. Redeem your points for exciting gifts and travel packages. There is no cap on how many points you can earn.

Why carry any other card?



- 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 fax to (316) 683-3510
- Applicant should keep the Important Disclosures for the rates, fees or terms associated with this program.
- Applicant should keep this page as an overview.





VISA Please see terms, rates and fees in Important Disclosures.



APPLICANT (Please print)

		_ Mother's Maiden Name
(as you want it to appear on your card) Physical Address	City	State Zip
Mailing Address	·	State Zip
(if different from physical address) Length of Residence		
•		Monthly Payment \$
, ,		Date of Birth/ /
Cell Phone ()	Email Address	
Employer or Source of Income*	Job Title	How Long (yrs.)
f self-employed, please list nature of business		
Annual Income*	Business Phone ()	U.S. Citizen Yes □ No □
Previous Employer	Job Title	How Long (yrs.)
Nearest Relative (not living with you)	Home Phone ()	Relationship
Physical Address		U.S. Citizen Yes □ No □ State Zip State Zip
		State = = Date of Birth / _ /
Cell Phone ()	·	
, , ,		
,	Job Title	How Long (yrs.)
Employer or Source of Income*		How Long (yrs.)
Employer or Source of Income* If self-employed, please list nature of business Annual Income*	Business Phone ()	
Employer or Source of Income* If self-employed, please list nature of business Annual Income* PLEASE READ CAREFULLY BEFORE SIGNING: This information and credit references or verification may be give 67208-6810 (BBOK). Offer subject to credit policies of BBC agreement and acceptance of such terms to be conclusively I/We hereby certify and warrant that the statements made by	Business Phone () application is submitted to obtain credit, and I/we certify that all information herein is true in based on inquiries from other parties. At the request of your Financial Institution, this colk. I/we agree to be bound by the terms and conditions of the Cardholder Agreem or presumed by applicant's use. If this is a joint application, the undersigned shall be jointly y melus are true and correct and that I/we have read the Important Disclosures in this applicant in the conditional conditions are true and correct and that I/we have read the Important Disclosures in this application. Agreement Cardholder Cardholder Agreement Cardholder Cardholder Cardholder Agreement Cardholder Card	e and complete. I/we agree and grant permission that inquiries may be made to verify ffer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, Wichita, KS ent, a copy of which will be mailed to the applicant if credit is granted. Receipt of such y and severally liable for any and all credit extended from time to time.
Employer or Source of Income* If self-employed, please list nature of business Annual Income* PLEASE READ CAREFULLY BEFORE SIGNING: This information and credit references or verification may be give 67208-6810 (BBOK). Offer subject to credit policies of BBC agreement and acceptance of such terms to be conclusively I/We hereby certify and warrant that the statements made by We intend to apply for joint credit. Initials	Business Phone () application is submitted to obtain credit, and I/we certify that all information herein is true in based on inquiries from other parties. At the request of your Financial Institution, this color. I/we agree to be bound by the terms and conditions of the <i>Cardholder Agreem</i> or presumed by applicant's use. If this is a joint application, the undersigned shall be jointly me/us are true and correct and that I/we have read the Important Disclosures in this application. A condition of the cardholder agreement of the color of the cardholder agreement of the c	e and complete. I/we agree and grant permission that inquiries may be made to verify ffer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, Wichita, KS ent, a copy of which will be mailed to the applicant if credit is granted. Receipt of such y and severally liable for any and all credit extended from time to time.
Employer or Source of Income* If self-employed, please list nature of business Annual Income* PLEASEREAD CAREFULLY BEFORE SIGNING: This information and credit references or verification may be give 67208-6810 (BBOK). Offer subject to credit policies of BBC agreement and acceptance of such terms to be conclusively I/We hereby certify and warrant that the statements made by I/We intend to apply for joint credit. Initials We intend to apply for joint credit. Initials X Applicant's Signature BALANCE TRANSFER TRANSFER OF BALANCE REQUEST: Upon approval, I w	Business Phone () application is submitted to obtain credit, and I/we certify that all information herein is true in based on inquiries from other parties. At the request of your Financial Institution, this color. I/we agree to be bound by the terms and conditions of the *Cardholder Agreem* (presumed by applicant's use. If this is a joint application, the undersigned shall be jointly me/us are true and correct and that I/we have read the Important Disclosures in this ap and A	e and complete. I/we agree and grant permission that inquiries may be made to verify ffer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, Wichita, KS ent, a copy of which will be mailed to the applicant if credit is granted. Receipt of such y and severally liable for any and all credit extended from time to time. Date Date account, up to my credit limit. Please send a copy of your last credit card ditor until the balance transfer is complete to avoid any late fees.
Employer or Source of Income* If self-employed, please list nature of business Annual Income* PLEASE READ CAREFULLY BEFORE SIGNING: This information and credit references or verification may be give 67208-6810 (BBOK). Offer subject to credit policies of BBC agreement and acceptance of such terms to be conclusively I/We hereby certify and warrant that the statements made by I/We intend to apply for joint credit. Initials X Applicant's Signature BALANCE TRANSFER TRANSFER OF BALANCE REQUEST: Upon approval, I we statement for each of the accounts indicated below. Please VISA Account No. Master Card Account No. Other (Name) - Account No.	Business Phone () application is submitted to obtain credit, and I/we certify that all information herein is true in based on inquiries from other parties. At the request of your Financial Institution, this color. It was agree to be bound by the terms and conditions of the *Cardholder Agreem* (presumed by applicant's use. If this is a joint application, the undersigned shall be jointly melus are true and correct and that I/we have read the Important Disclosures in this application and the Important Disclosures in this application. Date X Co-Applicant's Signature allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received. Continue making payments to your other credit account allow 30 days for payment to be received.	e and complete. I/we agree and grant permission that inquiries may be made to verify fifer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, Wichita, KS ent, a copy of which will be mailed to the applicant if credit is granted. Receipt of such yand severally liable for any and all credit extended from time to time. plication. Date Date account, up to my credit limit. Please send a copy of your last credit card ditor until the balance transfer is complete to avoid any late fees. Ider Signature Ider Signature

IMPORTANT DISCLOSURES

As of the date in the lower right corner of this application, the information listed was accurate. Because rates and terms are subject to change, you may contact us for the current information by writing to us at P.O. Box 20810, Wichita, KS 67208-6810 or email us at ccinfo@bbok.com.

The *Cardholder Agreement* should be reviewed for all conditions and terms.

BBOK is card issuer.

NO ANNUAL FEE!

Interest Rates and Interest Charges		
Annual Percentage Rate (APR) for Purchases	10.67% for Platinum 13.17% for Classic When you open your account, based on your creditworthiness. Your APR will vary with the market based on the Prime Rate.*	
APR for Balance Transfers	Same as Purchase Rate.	
APR for Cash Advances	21%	
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will begin charging interest on cash advances on the transaction date. We will not charge you interest on purchases if you pay your entire balance by the due date each month.	
For Credit Card Tips from The Consumer Financial Protection Bureau To learn more about factors to consider when applying for or using a visit the website of the Consumer Financial Protection Bureau at: http://www.consumerfinance.gov/learnmore		
Fees		
Annual Fees	None	
Transaction Fees	nnce Transfer h Advance None Either \$10 or 3% of the amount of each advance, whichever is greater.	
Penalty Fees Late Payment Returned Payment	Up to \$29 Up to \$29	

Effective October 3, 2017, Federal law provides important protections to members of the Armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must include, as applicable to the credit transaction or account: The costs associated with credit insurance premiums; fees for ancillary products sold in connection with the credit transaction; any application fee charged (other than certain application fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation fees for a credit card account). Call 1-888-675-6332 for recorded information.

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)."

*In the event you do not qualify for a Platinum Preferred card, we will automatically consider you for our Classic card. Your Rate on purchases is determined by adding 8.42% for Classic or 5.92% for Platinum to the "Prime Rate" published in the Wall Street Journal under the "Money Rates" subsection on the last business day of each month.