

CORPORATE RESOLUTION

Complete this section only if you are requesting a credit limit increase.

I, _____,
Secretary of _____,
a Corporation, do hereby certify that said Corporation is
duly organized and existing under the laws of the State of _____;
that all franchise and other
taxes required to maintain its corporate existence have
been paid when due, and that no such taxes are delinquent;
that no proceedings are pending for the forfeiture of its
Charter or for its dissolution voluntarily or involuntarily;
that it is duly qualified to do business in that State and is
in good standing in that State; that it is duly qualified to do
business in all states wherein the character of the property
owned by it or the nature of the business transacted by it
makes qualification as a foreign corporation necessary; that
there is no provision of the Charter or Bylaws of said
Corporation limiting the power of the Board of Directors to
pass the resolutions set out below, and that the same are in
conformity with the provisions of said Charter and Bylaws;
that I am the keeper of the records and minutes of the
proceedings of the Board of Directors of said Corporation,
which was duly called and held in accordance on the _____
day of _____, 20_____, there was held a
meeting of the Board of Directors of said Corporation,
which was duly called and held in accordance with law,
and in accordance with the Bylaws of the Corporation, and
at which meeting a quorum of the directors was present,
and that at said meeting the following resolution was duly
and legally passed and adopted, and that the same has not
been altered, amended, rescinded, or repealed, and is now
in full force and effect:

BE IT RESOLVED by the Board of Directors of the
Corporation that this Corporation does borrow from
America s Christian Credit Union from time to time, such
sums of money as the hereinafter-named officers of this
Corporation may decide are necessary, not to exceed so
indicate \$ _____ in the aggregate
at any one time.

X _____
AUTHORIZED SIGNATURE / BOARD SECRETARY

TITLE

DATE

IMPORTANT BUSINESS VISA® DISCLOSURE INFORMATION

Business Card Annual Fee	None
Variable Rate Information	The rate for purchases and cash advances on the Business VISA Card will be 3% above the Prime Rate as published in the Wall Street Journal on the last day of the month in March, June, September & December. The rate is subject to change every three months following your Statement Closing Date in April, July, October & January. The minimum nominal Annual Percentage Rate during the term of this agreement is 10.90%.
Grace Period for Repayment of Balances & Purchases	You have 25 days to repay your entire new balance before a finance charge on purchases will be imposed. There is no grace period on cash advances. A finance charge will be billed to the account from the date the cash advance posted.
Method of Computing the Balance for Purchases	Average daily balance. (including new purchases)
Fees for Paying Late	Late Payment Fee: \$7.00 if your Minimum Monthly Payment is not received within five (5) days of the due date.
Transaction Fee for Cash Advance	3% of the cash advance; \$5.00 minimum



Corporate Office
2100 E. Route 66, Suite 100
PO Box 5100
Glendora, CA 91740
(800) 343-6328
(626) 208-5400

www.AmericasChristianCU.com

AMERICA'S CHRISTIAN CREDIT UNION'S
BUSINESS VISA®



- ▶ Hotels
- ▶ Airfare
- ▶ Office Supplies
- ▶ Missionary Luncheons

And More!



YOUR MISSION IS OUR BUSINESS



1. Ministry/Business Information

NAME OF ORGANIZATION ACCU MEMBER # ADDRESS PHONE NUMBER CITY STATE ZIP CODE

We hereby apply for a Business VISA® Credit Card on the basis of the attached information. We hereby certify that all the information furnished is complete and correct. You may verify any of this information. We understand that from time to time, you may receive information from others and you will answer questions from others seeking the credit history of our account. The original or a copy of this application will be retained by the lender, even if the loan is not granted. We promise to repay the Credit Union all sums advanced on the VISA® Card, according to the terms and conditions of the note, disclosure and agreement form we will receive prior to the first transaction on the card. Our use of the card will certify our agreement.

2. Financial Information

*Only complete if you have not applied for another ACCU loan within the past six months.

CHURCH/MINISTRY: If the requested credit limit is over \$10,000, submit copies of the current year-to-date and the past two years of financial statements. FOR PROFIT BUSINESS: If the requested credit limit is over \$2,000, submit copies of the current year-to-date financial statements, the past two years of financial statements, and the past two years of tax returns.

Table with 4 columns: >> INCOME STATEMENT SUMMARY, CURRENT YEAR-TO-DATE (Up to and including last 30 days), PREVIOUS FISCAL YEARS, PREVIOUS TWO FISCAL YEARS. Rows include DATE, ANNUAL INCOME (All sources), ANNUAL EXPENSES (All sources), NET GAIN OR LOSS (Please attach a statement explaining any substantial loss).

>> DEPOSITS

Table with 4 columns: NAME OF FINANCIAL INSTITUTION (1), TYPE OF ACCOUNT, CURRENT BALANCE, NAME OF FINANCIAL INSTITUTION (2), TYPE OF ACCOUNT, CURRENT BALANCE.

>> SCHEDULE OF OUTSTANDING LOANS/LEASES

Table with 7 columns: CREDITOR (1) NAME AND ADDRESS, TYPE OF LOAN, MONTHLY PAYMENT, CURRENT BALANCE, CREDITOR (2) NAME AND ADDRESS, TYPE OF LOAN, MONTHLY PAYMENT, CURRENT BALANCE, CREDITOR (3) NAME AND ADDRESS, TYPE OF LOAN, MONTHLY PAYMENT, CURRENT BALANCE.

3. Designated Card Holders

Please provide information for individual cardholders. (Use additional sheets if necessary. Each cardholder listed will receive his/her own card, each with a separate card number.) It is a requirement that you include the individual's name on each account. The name of the church/business will always appear on the credit card, along with the individual's name. A consolidated billing statement will be issued on your account, unless you mark "N" in the Consolidated Billing Statement column. This statement provides detail on each individual account with the convenience of one billing statement and payment. Cash Access will default to No unless you request this service by marking "Y". An "N" will deny all cash advances on the account.

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 to you: When you open an account, we will ask for your name, address, date of birth, and other information that will identify you. We may also ask to see your driver's license or other identifying documents.

Table with 7 columns: INDIVIDUAL NAME (1) (Please Print), SIGNATURE, CASH ACCESS (Y/N), CONSOLIDATED BILLING STATEMENT (Y/N), CREDIT LIMIT, BIRTH DATE, SOCIAL SECURITY #, HOME PHONE #, DRIVERS LICENSE #, HOME ADDRESS, INDIVIDUAL NAME (2) (Please Print), SIGNATURE, CASH ACCESS (Y/N), CONSOLIDATED BILLING STATEMENT (Y/N), CREDIT LIMIT, BIRTH DATE, SOCIAL SECURITY #, HOME PHONE #, DRIVERS LICENSE #, HOME ADDRESS, INDIVIDUAL NAME (3) (Please Print), SIGNATURE, CASH ACCESS (Y/N), CONSOLIDATED BILLING STATEMENT (Y/N), CREDIT LIMIT, BIRTH DATE, SOCIAL SECURITY #, HOME PHONE #, DRIVERS LICENSE #, HOME ADDRESS, INDIVIDUAL NAME (4) (Please Print), SIGNATURE, CASH ACCESS (Y/N), CONSOLIDATED BILLING STATEMENT (Y/N), CREDIT LIMIT, BIRTH DATE, SOCIAL SECURITY #, HOME PHONE #, DRIVERS LICENSE #, HOME ADDRESS.

Minimum Credit Limit - \$500 per cardholder

Total credit line may not exceed Board Approved limit stated on the Visa® Corporate Resolution on the other side. *Total Credit Line:

4. Automatic Payment Option

Total Amount Due (Recommended) Minimum Payment Due

AUTOMATIC CREDIT CARD PAYMENT AGREEMENT

By selecting the automatic payment option, we authorize ACCU to debit the checking account for the credit card(s). We understand that the payment will be deducted approximately 25 days after the closing date of the statement. We understand and agree that in order for ACCU to make any payment requested in this agreement, we must have the payment amount available in the account, or the account may be assessed a fee. If insufficient funds occur three times, the automatic transfer will be automatically revoked. We further understand and agree that ACCU shall not be responsible for any act or failure to act, except in the case of gross negligence or willful misconduct. Furthermore, I agree to hold ACCU harmless from any claims, liabilities, attorneys fees and other costs and expenses of any and every kind and nature which may be incurred by them by their performance under this agreement.

NAME OF FINANCIAL INSTITUTION ROUTING NUMBER (MUST BE 9 DIGITS) ACCOUNT NUMBER

5. Authorization and Acknowledgement of Agreement

The undersigned Company Officer(s) named above represent that all information in this application is accurate and complete, and each is competent to enter into contracts. All appropriate corporate or other similar actions needed to authorize the indebtedness incurred hereunder have been accomplished. Except as otherwise prohibited by law the undersigned agree that America's Christian Credit Union may share all information about the undersigned that America's Christian Credit Union has or may obtain for, among other things, the purposes of evaluating credit applications or offering the undersigned products or services that America's Christian Credit Union believes may be of interest to the undersigned. By signing below, your ministry / business is accepting responsibility for any and all charges made by authorized signers.

X AUTHORIZED SIGNATURE / BOARD SECRETARY AUTHORIZED SIGNATURE TITLE DATE DATE

CHOOSE YOUR LOOK

Please select **one** of the following designs for your organization's cards and send this in with your application. If no box is selected, option 4 (standard) will be used.

Church



Sky



Footprints



Standard

