

Your Prescription For Financial Health
2221 S. Webster Avenue Green Bay WI 54301
Phone (920) 432-4353 Fax (920) 432-1301
www.wismedcu.org wismedcu@wismedcu.org

Online Loan Application Instructions

Please print these forms and fill them out with your information.

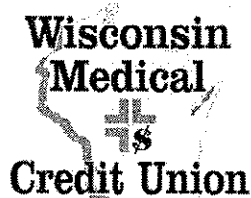
We may also ask for your most recent paystub.

You can submit your application by faxing it to (920)432-1301, email to wismedcu@wismedcu.org, or drop it off at our office at

Wisconsin Medical Credit Union
2221 S Webster Ave
Green Bay, WI 54301

If you have any questions please feel free to call us at (920)432-4353.

Thank You!



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Your Credit Report(s) and the Price You Pay for Credit

What is a credit report?	A credit report is a record of your credit history. It includes information about whether you pay your bills on time and how much you owe to creditors.
How did we use your credit report(s)?	<p>We used information from your credit report(s) to set the terms of the credit we are offering you, such as the Annual Percentage Rate/down payment.</p> <p>The terms offered to you may be less favorable than the terms offered to consumers who have better credit histories.</p>
What if there are mistakes in your credit report(s)?	<p>You have a right to dispute any inaccurate information in your credit report(s).</p> <p>If you find mistakes on your credit report(s), contact TransUnion, which is the consumer reporting agency from which we obtained your credit report(s).</p> <p>It is a good idea to check your credit report(s) to make sure the information it contains is accurate.</p>
How can you obtain a copy of your credit report(s)?	<p>Under federal law, you have the right to obtain a copy of your credit report(s) without charge for 60 days after you receive this notice. To obtain your free report(s), contact TransUnion:</p> <p>By telephone 1-800-680-7289</p> <p>On the web www.transunion.com</p>
How can you get more information about credit reports?	For more information about credit reports and your rights under federal law, visit the Federal Reserve Board's web site at www.federalreserve.gov , or the Federal Trade Commission's web site at www.ftc.gov .

Signature: _____

Date: _____

CREDIT UNION LOAN APPLICATION

Date _____ Name _____ Acct. No. _____
last first middle

INSTRUCTIONS

You may apply for individual or joint credit, but check only one of the following boxes.

Individual Credit - unmarried applicant. Complete only the left hand columns on both sides of this form and other sections as they apply.

Individual Credit - married applicant. If both you and your spouse are residents of Wisconsin, complete both the left and right hand columns. If either you or your spouse are not Wisconsin residents, complete only the left hand column.

Joint Credit - with your spouse. Complete the left and right hand columns on both sides of this form and other sections as they apply, then sign the following:
 We intend to apply for joint credit. X _____ X _____
Applicant Co-Applicant

Joint Credit - with another applicant or cosigner who is not your spouse. Each of you must complete a separate application. If both you and your spouse are Wisconsin residents include information about your spouse in the right hand column, and sign the following:
 I intend to apply for joint credit with: _____ X _____
Applicant

NOTICE TO MARRIED APPLICANT: No provision of a marital property agreement, a unilateral statement under Wis. Stat. sec. 766.59 or a court decree under Wis. Stat. sec. 766.70 adversely affects the interests of the credit union unless prior to the time the credit is extended, the credit union is furnished with a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision when the obligation to the credit union is incurred.

LOAN

I/we hereby apply for:

A direct loan of _____ \$ _____
 no. of payments _____ amount of payments \$ _____

Purpose (must be completed)

A credit line of _____ \$ _____
 *if checked, see attached Addendum which is incorporated here by reference.

I am a student at an institution of higher education and I live on campus or within 1000 feet of a campus border.

The credit union may offer either credit life/disability or debt cancellation/debt suspension coverage, but neither is required to obtain credit. If you notify the credit union that you are interested, the credit union will disclose the cost of this voluntary coverage to you. You must sign a separate election disclosing the terms and conditions for any coverage to become effective.

Collateral offered:	Titled in name(s) of:	Address:	Insured by:
Collateral offered:	Titled in name(s) of:	Address:	Insured by:

APPLICANT SPOUSE

IF INFORMATION IS IDENTICAL TO APPLICANT WRITE "SAME"
 Complete this section only if you and your spouse are Wisconsin Residents.

PERSONAL

		last	first	middle
Complete only if you are a Wisconsin resident or if you are applying for secured credit. <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Single/Divorced/Widowed) <input type="checkbox"/> Legally Separated				
Present street address	Length of residence	Present street address	Length of residence	
City / state / zip	County of residence	City / state / zip	County of residence	
Landlord or mortgage holder	Rent or mortgage pymt. \$	Landlord or mortgage holder	Rent or mortgage pymt. \$	
Landlord or mortgage holder address	Landlord's telephone	Landlord or mortgage holder address	Landlord's telephone	
Previous address (if under 2 years at present)	Length of residence	Previous address (if under 2 years at present)	Length of residence	
City / state / zip	Your birthdate	City / state / zip	Your birthdate	
Driver's license no.	Social Security no.	Driver's license no.	Social Security no.	
Relationship to joint applicant (if any)	Your home telephone	Status of spouse regarding this loan <input type="checkbox"/> joint applicant <input type="checkbox"/> not a joint applicant	Spouse's home telephone	

EMPLOYMENT

Present employer	Length of employment	Present employer	Length of employment
Position	Telephone	Position	Telephone
Supervisor	Clock / badge no.	Supervisor	Clock / badge no.
Employer's address		Employer's address	
Previous employer (if under 2 years at present)	Length of employment	Previous employer (if under 2 years at present)	Length of employment
Previous employer's address		Previous employer's address	

INCOME

Present income from employment \$ _____ per _____ net gross Aimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If revealed, it is being received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement	Ages of dependents	Present income from employment \$ _____ per _____ net gross Aimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. If revealed, it is being received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement	Ages of dependents
Type of income (alimony, child support or separate maintenance)	Monthly amount \$	Type of income (alimony, child support or separate maintenance)	Monthly amount \$
Name / address / phone of payor		Name / address / phone of payor	
Other income \$ _____ per _____	Source	Other income \$ _____ per _____	Source
Is any income listed in this section likely to be reduced in the next 2 years or before the credit requested is repaid? Yes (explain in detail on a separate sheet) No		Is any income listed in this section likely to be reduced in the next 2 years or before the credit requested is repaid? Yes (explain in detail on a separate sheet) No	

CREDIT RECORDS

Institution holding your checking account	Checking account no.	Institution holding your checking account	Checking account no.
Institution holding your savings account	Savings account no.	Institution holding your savings account	Savings account no.
Nearest relative not living with you	Relationship	Nearest relative not living with you	Relationship
Address	Telephone	Address	Telephone
Other relative not living with you	Relationship	Other relative not living with you	Relationship
Address	Telephone	Address	Telephone

APPLICANT					SPOUSE				
IF INFORMATION IS IDENTICAL TO APPLICANT WRITE "SAME"									
List all debts, obligations and credit accounts (medical bills, auto loans, repairs, charge accounts, credit cards, etc.). Show them even though the present balance may be zero. Include any disputed debts and also any loans or contracts on which you are a co-maker, co-signer or guarantor. If any account listed below is not carried in your name, then state the name under which it's carried. Use a separate sheet if necessary. Place a "Y" for yes, an "N" for no next to each debt to show whether or not it is past due. Omitting debts for which you are liable is grounds for denial of the loan application.									
Y/N	Creditor	Account Number	Balance	Mo. Pyt.	Y/N	Creditor	Account Number	Balance	Mo. Pyt.
	This Credit Union		\$	\$		This Credit Union		\$	\$
TOTAL					TOTAL				
For whom are you co-signed on a loan?			Name of Institution		For whom are you co-signed on a loan?			Name of Institution	
Have you had any judgment(s) filed against you?			Amount \$		Have you had any judgement(s) filed against you?			Amount \$	
Have you ever claimed bankruptcy? Which court?			Year filed		Have you ever claimed bankruptcy? Which court?			Year filed	
Are you obligated to make child support payments?			Amount \$		Are you obligated to make child support payments?			Amount \$	

Type of Asset	Market Value	Outstanding Loan	Type of Asset	Market Value	Outstanding Loan
Savings & checking balances	\$	\$	Savings & checking balances	\$	\$
Real estate (location, date acquired)			Real estate (location, date acquired)		
Automobile (year, make, model)			Automobile (year, make, model)		
Other (describe)			Other (describe)		
Other (describe)			Other (describe)		
Other (describe)			Other (describe)		

I/we certify that this information on all pages has been supplied truthfully, accurately and voluntarily, and therefore authorize this credit union to investigate our creditworthiness, credit history and financial responsibility through any credit bureau or by any other reasonable means for consideration for the loan applied for herein, or for any other service offered by this credit union or its affiliate. The credit union may release information about its credit experience with me/us as permitted by law. If this application is for the purpose of encumbering real property, I/we agree to pay all allowable expenses incurred in processing this application whether or not the loan is approved. This application does not constitute a contract for the extension of credit. I/we understand that it may be 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 1014.

Applicant's Signature _____ Date _____ Spouse Signature (if joint applicant) _____ Date _____

COMPLETE THIS SECTION ONLY IF YOU ARE MARRIED AND YOU ARE APPLYING FOR CREDIT SEPARATE FROM SPOUSE

I certify that the credit being applied for, if granted, will be incurred or obtained in the interest of the marriage or family. This statement is made in accordance with Wis. Stat. sec. 766.55(1).

Applicant's Signature _____ Date _____

IF THIS SECTION APPLIES, WE ARE REQUIRED BY WISCONSIN LAW TO NOTIFY YOUR SPOUSE BY MAIL IF YOUR LOAN IS GRANTED.

DO NOT WRITE BELOW - FOR CREDIT UNION USE ONLY

CREDITOR	DATE MADE	AMOUNT	NO. MONTHS	PAYMENT	BALANCE	DATE LAST PAID	SECURITY	HOW PAID

Original Term of Loan	A&H _____	C.L. _____	DEBT RATIO (including this loan)	Date Note APR _____ %	Filing Fees \$ _____
No. Mos. Elapsed (remaining)	_____	_____	total monthly debt / total monthly income (use gross or net)	Amount Requested \$ _____	Amount of Note \$ _____
Original Premium	\$ _____	\$ _____		Present Balance \$ _____	Prepaid Finance Charge \$ _____
Refund	\$ _____	\$ _____		Int. Due to Date \$ _____	Finance Charge { Interest + pre-pd. F.C. } \$ _____
New Premium	\$ _____	\$ _____		AH If re finance, add Net Amt. to note. \$ _____	Amount Financed { Note - pre-pd. F.C. } \$ _____
Premium Difference	\$ _____	\$ _____	_____ %	CL Otherwise add gross. \$ _____	Total of Payments \$ _____

LOAN OFFICER	OR	CREDIT COMMITTEE
Total Credit Approved: \$ _____		Notice to spouse required? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Date sent _____ By (Initials) _____

DESCRIBE COUNTER OFFER (if Any): _____

SPECIFIC REASON(S) FOR DENIAL: _____

Conditions for approval, or comments	Credit committee signatures	Date
	1. _____	
	2. _____	
	3. _____	

Loan officer signature _____ Date _____

ECOA notice and reason for denial sent or delivered on _____ (Date) By _____ (Initials)