



# Quickline Application

(please complete in ink)

**LOAN REQUEST:** I am requesting an Unsecured Open End Line of Credit Account with a credit limit of \$\_\_\_\_\_.

**INFORMATION REGARDING APPLICANT(S)**

Married applicants can apply for an individual account. I will indicate if I want an individual account or a joint account with another person.  
 Individual Account                       Joint Account (Spouse)                       Joint Account (Non-Spouse)  
 Married                                       Unmarried                                       Separated  
 I (We) will complete Co-Applicant Section about spouse or joint applicant if: 1) this is to be a joint account; 2) my spouse will use this account; 3) I live in a community property state (such as California or Nevada); or 4) I am relying on the income of my spouse or another person in applying for my account.

Member #	Social Security #	Driver's Lic. #	Home Phone	
Last Name	First Name	Middle	Date of Birth	# of Dependents
Home Address	City/State/Zip		Yrs. in Res.	<input type="checkbox"/> Own <input type="checkbox"/> Rent      Monthly Pymt. \$
Employer Name & Address	City/State/Zip	Monthly Income \$	Work Phone	Length of Employmt.
Co-Applicant Name	Social Security #		Driver's Lic. #	Home Phone
Home Address	City/State/Zip		Date of Birth	
Employer Name & Address	City/State/Zip	Monthly Income \$	Work Phone	Length of Employmt.
Other Monthly Income \$	Total other monthly income from all sources. I may include my spouse's income. Income from alimony, child support, or separate maintenance need not be disclosed unless I wish it to be considered for purposes of this application.			

**FINANCIAL INFORMATION (These questions apply to both Applicant and Other)**

If a "YES" answer is given to a question, explain on an attached sheet.	<b>APPLICANT</b>		<b>CO-APPLICANT</b>	
	YES	NO	YES	NO
Have you ever filed bankruptcy or had a debt adjustment plan confirmed under Chapter 13?				
Are you a party in a lawsuit?				
Are you other than a U.S. Citizen or Permanent Resident Alien?				
Are you a co-maker, co-signer, or guarantor on any loan not listed above? For whom (name of others obligated on loan): _____ To whom (name of creditor): _____				

**LOAN AGREEMENT**

"I," "me," and "my," mean each and all of the applicants signing below.

1. I certify the accuracy of the information in this application given and I will notify the Credit Union in writing immediately if there is any change in my financial condition. It is a violation of Section 1014, Title 18, U.S. Code, to make a false statement or overvalue security for the purpose of influencing the action of any federally insured credit union.
2. I authorize you to gather whatever credit and employment information you consider appropriate from time to time (I understand that this will assist, for example, in determining my eligibility for renewal of credit and additional extensions of credit). I authorize you to give information concerning your credit experience with me to others. I understand and agree that you may retain this application and any other credit information you may receive.
3. I agree that by using or authorizing another to use the Account, I will be bound by the terms and conditions of the attached Open-End Line of Credit Agreement and Federal Disclosure Statement and the Additional Disclosure, receipt of which is hereby acknowledged.

<b>Member/Applicant's Signature</b>	<b>Date</b>	<b>Co-Applicant's Signature</b>	<b>Date</b>
<b>X</b> _____	_____	<b>X</b> _____	_____

Belonging Never Felt Better

2650 Harrison Avenue  
Eureka, CA 95501



707-445-8801  
800-974-9727

THIS IS NOT A CONTRACT FOR INSURANCE  
Consumer

BORROWER 1 NAME	BORROWER 2 NAME	ACCOUNT NUMBER
-----------------	-----------------	----------------

COAST CENTRAL MEMBER LOAN PROTECTION CONTRACT ("Contract")

PROTECTED LOAN(S)

LOAN NUMBER: \_\_\_\_\_

OPTIONS

YOU ELECT THE FOLLOWING OPTION: (check only one box)	<input type="checkbox"/> Life, Disability & Unemployment - Life Plus - Disability - Involuntary Unemployment	<input type="checkbox"/> Life, Disability - Life Plus - Disability	<input type="checkbox"/> Life - Life Plus	<input type="checkbox"/> No Protection
Program Fee: Rate per \$100 of the Monthly Outstanding Loan Balance	\$0.499	\$0.399	\$0.139	

Estimated Total Fees for Option chosen (Closed-End Only)	\$ _____
--	----------

This Contract protects the first two Borrowers listed on the lending agreement.

ELIGIBILITY QUESTIONS:

Subject to the terms, conditions and exclusions, You are eligible for protection under this Contract if You are a Borrower on the Loan on the Effective Date of Protection and meet the eligibility requirements below.

If electing an option with Disability or Involuntary Unemployment, You must answer Question 1.

1. Are You actively working, for wages or profit, for 25 hours or more per week on the date You sign this Contract?

You will be considered actively working if You are absent from work due to sabbatical, strike, or vacation, but will soon return to work. You will not be considered actively working if You are on an Annual, Regularly Scheduled or Seasonal Layoff, medical or Disability leave.

Borrower 1	Borrower 2
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If at least one Borrower answered "Yes" to Question 1, both Borrowers are eligible for options that include Disability or Involuntary Unemployment protection.

**Important Notices:** Please read this Contract in its entirety. You are bound by the terms and conditions of this Contract.

- We reserve the right to refuse Your purchase of the protection.
- In this Contract, the term "You" or "Your" mean the Borrower(s) and "We", "Us", or "Our" mean the Creditor.
- Protection is voluntary and not required to obtain credit. We will not consider whether or not You elect protection in making a credit decision.
- This Contract contains terms and conditions which may limit or exclude benefits.
- You may not qualify for all benefits.
- Protection is limited to a maximum of \$50,000. You will not be charged a Program Fee on any amount greater than this maximum.
- Protection for Life Plus protection will be reduced at the end of the month during which You reach Your 75th birthday.
- This Contract contains the conditions upon which We will cancel all or a portion of the Protected Balance and/or cancel the Protected Payment and the Program Fee. The terms and conditions which explain how We will cancel all or a part of Your Protected Balance are provided in this Contract.
- This Contract replaces all credit insurance policies and/or certificates, similar payment protection plans, and program contracts You previously entered into with respect to the Loan.

Subsequent Election

If the election above represents a replacement of credit insurance, similar payment protection or a change in the program for an existing Loan, and the cost of the newly elected protection results in an increased Program Fee, You agree to:

- make additional Loan payments of the same amount until what You owe has been repaid.
- increase Your Loan payment to \$ \_\_\_\_\_ per \_\_\_\_\_.
- make \_\_\_\_\_ additional Loan payments and increase Your Loan payment to \$ \_\_\_\_\_ per \_\_\_\_\_.
- increase Your monthly payment according to the terms of Your Loan.
- increase the monthly Program Fee withdrawn from Your account.

Your signature or authentication below means: (a) that You meet the eligibility requirements shown above; (b) that Your election above will remain in effect, according to the terms of the Contract, unless subsequently modified; (c) that You agree that You have received and thoroughly read the Contract; (d) that You agree to pay for and, where applicable, let Us add the Program Fee to Your Loan balance each month, which would subject the Program Fee to finance charges like the rest of Your Outstanding Balance; (e) that the fee You are charged for this protection is subject to change; and (f) if the "No Protection" checkbox is marked or if no checkbox is marked in the Options section, You do not have protection.

BORROWER 1 SIGNATURE	DATE
X	

BORROWER 2 SIGNATURE	DATE
X	

**This form is required for unsecured consumer loans of \$10,000 or more.**



## PERSONAL FINANCIAL STATEMENT

**IMPORTANT: Read these directions before completing the Statement.**

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1 and 3.
- If you are applying for joint credit with another person, complete all Sections providing information in Section 2 about the joint applicant.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all sections, providing information in Section 2 about the person upon whose alimony, support or maintenance payments or income or assets you are relying.
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete Sections 1 and 3.

To: COAST CENTRAL CREDIT UNION

SECTION 1—INDIVIDUAL INFORMATION (TYPE OR PRINT)				SECTION 2—OTHER PARTY INFORMATION			
Name				Name			
Residential Address				Residential Address			
City, State & Zip				City, State & Zip			
Social Security Number		--	--	Social Security Number		--	--
Date of Birth		/	/	Date of Birth		/	/
Position or Occupation				Position or Occupation			
Business Name				Business Name			
Business Address				Business Address			
City, State & Zip				City, State & Zip			
H Phone	( ) -	Bus Phone	( ) -	H Phone	( ) -	Bus Phone	( ) -

SECTION 3—STATEMENT OF FINANCIAL CONDITION:			AS OF: (DATE) _____ / _____ / _____		
ASSETS		IN DOLLARS	LIABILITIES		IN DOLLARS
(Do not include assets of doubtful value)		(Omit cents)	(Omit cents)		(Omit cents)
Cash with Coast Central Credit Union - Sched A			Revolving debt outstanding		
Cash on hand and in Other Fin Inst - Sched A			Unpaid income tax		
U.S. Gov't./Marketable Securities - Schedule B			Other unpaid taxes and interest		
Cash Value-Life Insurance—Schedule C			Notes Payable (other than real estate)--Sched F		
Real Estate Owned—Schedule D			Real Estate Mortgages Payable—Schedule D		
Notes / Loans Receivable			Vehicle/RV loans		
Retirement Accounts / IRAs			Other Debts—itemize		
Vehicles and RVs					
Equipment					
Non-marketable Securities—Schedule E					
Personal Property			<b>TOTAL LIABILITIES</b>		
Other Assets—itemize			<b>NET WORTH (Total Assets minus Total Liabilities)</b>		
<b>TOTAL ASSETS</b>			<b>TOTAL LIABILITIES AND NET WORTH</b>		

SOURCES OF INCOME FOR THE YEAR ENDED _____		PERSONAL INFORMATION
Salary, Bonuses and Commissions	\$ _____	Do you have a will? _____ If so, name of executor.
Dividends	\$ _____	Are you a partner or officer in any other venture? If so, describe.
Real Estate Income	\$ _____	Are you obligated to pay alimony, child support or separate maintenance payments? _____ If so, describe.
Other Income (Alimony, 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.)	\$ _____	Are any assets pledged other than as described on schedules? _____ If so, describe.
<b>TOTAL INCOME</b>	\$ _____	Income tax settled through (date) _____

Do you have any contingent liabilities? If so, describe. _____ _____	Are you a defendant in any suits or legal actions? _____
As endorser, co-maker or guarantor? \$ _____	Personal bank accounts carried at: _____
On leases or contracts? \$ _____	Have you ever been declared bankrupt? _____ If so, describe on separate sheet.
Legal claims / other special debt \$ _____	Are any of your assets held in a Trust? _____ If so, please describe, and provide a copy of the Trust Declaration Page. _____
Amount of contested income tax liens \$ _____	_____

PLEASE COMPLETE SCHEDULES BELOW (attach separate sheet if needed)

**SCHEDULE A—CASH DEPOSIT ACCOUNTS**

ACCOUNT TITLE	FINANCIAL INSTITUTION	ACCOUNT TYPE	AVERAGE BALANCE	ACCOUNT TITLE	FINANCIAL INSTITUTION	ACCOUNT TYPE	AVERAGE BALANCE
			\$				\$
			\$				\$

**SCHEDULE B—U.S. GOVERNMENT AND MARKETABLE SECURITIES**

NUMBER OF SHARES OR FACE VALUE (BONDS)	DESCRIPTION	IN NAME OF	ARE THESE PLEDGED?	MARKET VALUE
				\$
				\$
				\$

**SCHEDULE C—LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE**

NAME OF INSURANCE COMPANY	OWNER OF POLICY	BENEFICIARY	FACE AMOUNT OF POLICY	LOANS ON POLICY	CASH SURRENDER VALUE
			\$	\$	\$
			\$	\$	\$

**SCHEDULE D—REAL ESTATE OWNED**

ADDRESS & TYPE OF PROPERTY	TITLE IN NAME OF	DATE ACQUIRED	PERCENT OWNERSHIP	AMOUNTS BASED ON % OF OWNERSHIP INTEREST			
				ORIGINAL COST	MARKET VALUE	MORT. AMOUNT	PMT. AMOUNT
			%	\$	\$	\$	\$
			%	\$	\$	\$	\$
			%	\$	\$	\$	\$
			%	\$	\$	\$	\$
			%	\$	\$	\$	\$

**SCHEDULE E—NON-MARKETABLE SECURITIES**

NUMBER OF SHARES	DESCRIPTION	IN NAME OF	ARE THESE PLEDGED?	SOURCE OF VALUE	VALUE
					\$
					\$

**SCHEDULE F—NOTES PAYABLE (OTHER THAN REAL ESTATE)**

NAME & ADDRESS OF LENDER	SECURED/UNSECURED?	ORIGINAL DATE	HIGH CREDIT	CURRENT BALANCE	PMT AMT
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$

**SCHEDULE G—BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED**

NAME & ADDRESS OF LENDER	CREDIT IN THE NAME OF	SECURED / UNSEC?	ORIGINAL DATE	HIGH CREDIT	CURRENT BALANCE	PMT AMT
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$

THE INFORMATION CONTAINED IN THIS STATEMENT IS PROVIDED FOR THE PURPOSE OF OBTAINING OR MAINTAINING CREDIT WITH YOU ON BEHALF OF THE UNDERSIGNED, OR PERSONS, FIRMS OR CORPORATIONS IN WHOSE BEHALF THE UNDERSIGNED MAY EITHER SEVERALLY OR JOINTLY WITH OTHERS, EXECUTE A GUARANTY IN YOUR FAVOR. EACH UNDERSIGNED UNDERSTANDS THAT YOU ARE RELYING ON THE INFORMATION PROVIDED HEREIN (INCLUDING THE DESIGNATION MADE AS TO OWNERSHIP OF PROPERTY) IN DECIDING TO GRANT OR CONTINUE CREDIT. EACH UNDERSIGNED REPRESENTS AND WARRANTS THAT THE INFORMATION PROVIDED IS TRUE AND COMPLETE AND THAT YOU MAY CONSIDER THIS STATEMENT AS CONTINUING TO BE TRUE AND CORRECT UNTIL A WRITTEN NOTICE OF A CHANGE IS GIVEN TO YOU BY THE UNDERSIGNED. YOU ARE AUTHORIZED TO MAKE ALL INQUIRIES YOU DEEM NECESSARY TO VERIFY THAT ACCURACY OF THE STATEMENTS MADE HEREIN, AND TO DETERMINE MY/OUR CREDITWORTHINESS. YOU ARE AUTHORIZED TO ANSWER QUESTIONS ABOUT YOUR CREDIT EXPERIENCES WITH ME/US.

\_\_\_\_\_  
Signature (Individual)

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature (Other Party)

\_\_\_\_\_  
Dated



## QuickLine Open-End Line of Credit Agreement And Federal Disclosure Statement

In this Open-End Line of Credit Agreement and Federal Disclosure Statement (“Agreement”), the words I, ME, MINE and MY mean each and all of those who apply for or use the Line of Credit Account opened pursuant to this Agreement (“Account”). The words YOU, YOUR, YOURS and CREDIT UNION mean Coast Central Credit Union.

**NOTICE: THIS DOCUMENT CONTAINS PROVISIONS FOR A VARIABLE ANNUAL PERCENTAGE (INTEREST) RATE.**

**LOAN ACCOUNT:** My Account will be an open-end or revolving loan. This means that I can borrow the full amount of my Credit Limit, repay the principal and interest in full or in part, and borrow again up to my Credit Limit as long as I continue to be creditworthy. If there is more than one borrower on this Account, I understand that each borrower can borrow up to the full amount of the Credit Limit and that I am liable for repayment of all sums advanced to any borrower even if I did not receive any of the money advanced or obtain any benefit from the Account. Each person who applied for this Account and signed the QuickLine Application is jointly and severally responsible to repay all sums advanced under this Agreement.

**ACCOUNT ADVANCES:** I can request an Account advance under this Agreement either orally or in writing. I may also request and advance, subject to the terms of separate agreements, by use of the Coast Central Online telephone banking service or by overdrawing a Credit Union checking account, if these services are provided by the Credit Union. Account advances can be disbursed by cash, by check payable to me, or by deposit into any of my Credit Union accounts. If the disbursement is by check payable to me, my endorsement and negotiation of the check will acknowledge my acceptance of the Account advance and the terms of this Agreement. If disbursement is by other means, I agree that your honoring of my written, oral or electronic instructions will complete the loan advance and I will be obligated to repay to you under the terms of this Agreement as if I had personally endorsed a loan check. You have the right to refuse to give me an Account advance. You will notify me in writing of the reason for any such denial of credit. Account advances may be refused if I have already borrowed up to the Credit Limit set by you, if there has been an adverse change in my credit standing such as not making current loan payments, if I cease to qualify for membership in the Credit Union, or for other similar reasons allowable under state or federal law. You reserve the right to set a minimum Account advance amount. Advances may at no time cause the Account Balance to exceed the Credit Limit.

**CREDIT LIMIT:** A Credit Limit will be established by you at the time this Account is approved. The amount of this limit will be based on various factors including current Credit Union loan policy, my ability to pay, and my creditworthiness. You reserve the right to: (1) require me to provide updated financial information; (2) obtain new credit reports; and (3) and re-evaluate the Credit Limit on this Account at any time. Notice of changes in my Credit Limit will be made in writing to the last known address for this Account. If I object to any Credit Limit increase, I must notify you immediately. If my Credit Limit is increased, I am immediately responsible for the new Credit Limit and any increase in the Loan account balance even when it differs from an amount previously agreed to orally or in writing.

**PAYMENT:** I promise to repay you or to your order in U.S. Dollars with an instrument drawn on a financial institution in the United States at your office or at the address set forth on my periodic statement all sums advanced to me or any other person I permit to use this Account on the terms and at the rates set forth herein, plus any INTEREST CHARGES assessed on my Account, and any other charges and fees which I may owe you under the terms of this Agreement (the “Account Balance”). Payments will continue until I have paid in full the Account Balance. I understand and agree that each payment is applied first to late charges, if any, then to INTEREST CHARGES and then to the unpaid balance.

**CREDIT INFORMATION:** I authorize you to investigate my credit standing when opening, renewing, or reviewing the Account, and I authorize you to disclose information regarding the Account to credit bureaus and other creditors who inquire of you about my credit standing to the extent authorized by law.

**CHANGES OF TERMS:** Account and Agreement terms are not guaranteed for any period of time. I understand and agree that you may amend, modify, add to, or delete from this Agreement any of its terms and conditions, including financial terms such as the method of application and the amount of any INTEREST CHARGE, or other FINANCE CHARGE, ANNUAL PERCENTAGE RATE, daily periodic rate, and/or fee in accordance with applicable laws. If required by applicable law, you will mail a notice of the change to me at my last known address. I also understand that in the event of a significant change in account terms, as defined under the Federal Truth in Lending Act, any such notice will be mailed or delivered to me at least forty-five (45) days prior to the effective date of the significant change as required by applicable law. If you are required by applicable law to provide me a right to reject significant changes to this Agreement prior to the effective date of such changes, you will provide me with an explanation of how to reject the significant changes. You may change the terms of this Agreement based on information in my credit report, market conditions, business strategy or for any other reason. Notice of a change in terms is required, but may be sent as late as the effective date of the change, where the change has been agreed to in writing by me.

**WHEN INTEREST CHARGE IS IMPOSED:** An INTEREST CHARGE will be assessed on any unpaid balance for the period such balance is outstanding. The INTEREST CHARGE begins to accrue on the date each transaction is posted to my Account and there is no grace period.

**VARIABLE ANNUAL PERCENTAGE RATE:** Account advances are subject to a variable ANNUAL PERCENTAGE RATE which is based on the prior quarter's average of the Wall Street Journal's published Prime Rate, rounded to the nearest 0.25% ("Index") plus a Margin. The Index in effect as of each "Adjustment Date" (defined in the paragraph below) plus the Margin equals my ANNUAL PERCENTAGE RATE. My ANNUAL PERCENTAGE RATE may increase or decrease on a quarterly basis during the term of this Agreement based on a corresponding increase or decrease in the Index. In the event the Prime Rate ceases to be published, changes in the ANNUAL PERCENTAGE RATE will be related to a comparable Index.

My ANNUAL PERCENTAGE RATE is subject to change the first (1<sup>st</sup>) business day of each quarter in January, April, July and October. These dates shall be known as "Adjustment Dates." The Index in effect on March 31 shall be used to calculate my ANNUAL PERCENTAGE RATE change effective April 1 of the same year. The Index in effect on June 30 shall be used to calculate my ANNUAL PERCENTAGE RATE change effective July 1 of the same year. The Index in effect on September 30 shall be used to calculate my ANNUAL PERCENTAGE RATE change effective October 1 of the same year. The Index in effect on December 31 shall be used to calculate my ANNUAL PERCENTAGE RATE change effective January 1 of the following year.

**For the Index, Margin, initial Daily Periodic Rate and corresponding initial ANNUAL PERCENTAGE RATE in effect as of the date of this Agreement, I will refer to the separate page titled "Additional Disclosure – QuickLine Open-End Line of Credit Agreement and Federal Disclosure Statement" which has been delivered together with this Agreement and is an integrated part of this Agreement.**

The Daily Periodic Rate is determined by dividing the ANNUAL PERCENTAGE RATE by 365 and will change when the ANNUAL PERCENTAGE RATE changes. You may waive an increase in the ANNUAL PERCENTAGE RATE when such an increase can be made, but such a waiver shall not be construed as a waiver of your right to increase the ANNUAL PERCENTAGE RATE at a future date when entitled to do so.

There is no maximum ANNUAL PERCENTAGE RATE during the term of this Agreement, except that the maximum may not exceed the maximum ANNUAL PERCENTAGE RATE permitted under applicable law at the time of each Adjustment Date. Your ANNUAL PERCENTAGE RATE will never be less than 6% during the term of this Agreement. There are no annual (or other) limitations on changes in the ANNUAL PERCENTAGE RATE during the term of this Agreement. Decreases in the ANNUAL PERCENTAGE RATE in accordance with the terms of this Agreement are mandatory. Increases in the ANNUAL PERCENTAGE RATE in accordance with the terms of this Agreement are at your discretion. Any increase or decrease in the ANNUAL PERCENTAGE RATE may result in changes in the amount and/or number of payments required to repay the Account Balance.

**HOW YOU DETERMINE MY ACCOUNT BALANCE UPON WHICH PERIODIC INTEREST CHARGES ARE ASSESSED – DAILY BALANCE METHOD (INCLUDING CURRENT TRANSACTIONS):** You figure the INTEREST CHARGE on my Account by applying the Daily Periodic Rate to the daily balance of my Account. To get the daily balance, you take the beginning balance of my Account each day, add any new advances and fees, and subtract any unpaid interest (or other finance charges) and payments or credits. This gives us the daily balance. Actual INTEREST CHARGES will be shown on my monthly statement.

**ANNUAL PERCENTAGE RATE CHANGE NOTICE:** Written notice of a change in the ANNUAL PERCENTAGE RATE will appear on my periodic statement.

**MINIMUM MONTHLY PAYMENT:** Every month, I must pay at least the Minimum Payment Due by the Payment Due Date shown on my periodic statement. The minimum monthly payment is calculated according to the table set forth in the Additional Disclosure delivered together with this Agreement. The minimum monthly payment will be no less than \$33.00 or the Account Balance, whichever is less. In addition, I must pay any amount on my periodic statement listed as past due and any late charge. At any time my Account Balance exceeds my Credit Limit, I must pay the excess. By separate agreement, I may authorize you to automatically transfer the Minimum Payment Due from my Credit Union share or checking account. I may, of course, pay more frequently, pay more, or pay the Account Balance in full, and I will reduce my periodic INTEREST CHARGE by doing so.

**PREPAYMENT OR IRREGULAR PAYMENTS:** Though I need only pay the Minimum Payment Due, I understand that I have the right to repay my Account Balance at any time without penalty. I also understand that I will only be charged INTEREST CHARGES to the date I repay my entire Account Balance. I may make larger payments without penalty and this may reduce the total amount of INTEREST CHARGES that I will repay. If I pay more than the Minimum Payment Due in any month and there is still a balance due, I must continue to make Minimum Payments in future months. Any partial prepayment of my Account Balance will not advance my next payment due date(s). I understand and agree that any payment that (a) delays or (b) accelerates the repayment of my Account Balance will (a) increase or (b) decrease my Daily Periodic INTEREST CHARGE.

**PAYMENTS BY AUTOMATIC TRANSFER:** If I request payment by automatic transfer, I understand and agree that no payment can or will be made if there are insufficient or uncollected funds in the designated share or checking account to make the scheduled loan payment. Should this event occur, I understand and agree that I will not be released from making the payment. Any automatic transfer I have requested will remain in effect until I cancel it in writing or the Account Balance is paid in full. You may cancel this service at your discretion.

**LAST PAYMENT:** I give you permission to deposit the excess of my last payment, if any, to my Regular Savings Account.

**LATE CHARGE:** If my minimum monthly payment is more than ten (10) days late, I will be charged a late charge of \$10.00.

**LIEN ON SHARES:** If I am in default, you may impress and enforce a lien on all shares (except IRA Accounts) then on deposit needed by you to repay the unpaid balance in accordance with California Financial Code § 14856 and your bylaws.

**DEFAULT:** I will be in default if: 1) I do not pay any minimum monthly payment on time or in the proper amount; 2) I fail to live up to any of the terms and conditions of this Agreement; 3) my creditworthiness is impaired; 4) I die, become insolvent or am the subject of bankruptcy or receivership proceedings; or 5) I exceed my Credit Limit. In the event of any action by you to enforce this Agreement, I agree to pay the costs thereof, reasonable attorneys' fees, and other expenses. I understand and agree that INTEREST CHARGES at the ANNUAL PERCENTAGE RATE as permitted under this Agreement will continue to accrue until I repay my entire Account Balance.

**ACCELERATION AND COLLECTION-RELATED CHARGES:** If I am in default, I understand and agree that you have the right to temporarily or permanently suspend any and all Account privileges and/or you may demand immediate payment of the Account Balance, including INTEREST CHARGES, other FINANCE CHARGES, late charges and your collection costs, reasonable attorneys' fees, and court costs (collectively, "collection-related charges"). I understand and agree that I will be subject to INTEREST CHARGES at the ANNUAL PERCENTAGE RATE in effect at the time on the unpaid balance, and other FINANCE CHARGES, late charges, and collection-related charges under the terms disclosed in this Agreement, until I repay the entire Account Balance.

**FUTURE ADVANCES:** I may request advances in accordance with your current loan policies up to my Credit Limit by written or oral request or by such additional credit devices (including, but not limited to, access by audio response telephone banking, personal computer online banking and loan drafts drawn by me) as you may offer from time to time. I understand and agree that all advances requested by me are subject to your approval and may be periodically reviewed by you.

**AUTOMATIC OVERDRAFT AUTHORIZATION:** I authorize you to clear any overdraft(s) on my checking account with you by an advance from the Account in even increments of \$100.00, or in such increments as you may from time to time determine, subject to the terms of this Agreement. I will be charged a \$5.00 transfer fee each time an automatic overdraft protection transfer is made. If I overdraw my checking account by writing a check, the amount of the overdraft, plus the amount of the overdraft fee, up to the unused Credit Limit for this Account, will be added to my Account Balance under this Agreement if and when you pay the check. If I am not eligible to receive advances from you under this Agreement, my checks may be returned and my Account closed.

**TERMINATION:** You may terminate this Agreement, reduce my Credit Limit, or suspend my borrowing privileges upon adverse reevaluation of my creditworthiness or my default. Either you or I may terminate this Agreement for other good cause. In no event shall any termination, reduction in my Credit Limit, or suspension of my borrowing privileges relieve me of my obligation to repay my entire Account Balance, collection-related charges, late charges, if any, and INTEREST CHARGES.

**CHANGE OF NAME, ADDRESS, and EMPLOYMENT:** I agree to notify you of any change in my name, address or employment and agree to inform you of any change in my financial creditworthiness.

**ACCURACY OF INFORMATION:** The information provided in my request for credit (application) is accurate and I will notify you in writing immediately if there is a change in my financial condition. You may retain the application. I understand that it is a violation of Section 1014, Title 18, US Code to make false statements or over value security for the purpose of influencing the action of any federally insured credit union. You may gather credit and/or employment information you deem necessary and appropriate from time to time and you may give information concerning your credit experience with me to others.

**DELAY IN ENFORCEMENT:** You can delay enforcing any of your rights under this Agreement without losing them.

**GOVERNING LAW:** I understand and agree that this Agreement is made in California and shall be governed by the laws of the State of California to the extent that California law is not inconsistent with controlling Federal law. I also understand and agree that California's choice of law rules shall not be applied if that would result in the application of non-California law.

**INTEGRATED DOCUMENT(S):** Any separate sheet of paper labeled “Additional Disclosure – QuickLine Open-End Line of Credit Agreement and Federal Disclosure Statement” which is delivered together with this Agreement is an integrated part of the Agreement.

**COPY RECEIVED:** I acknowledge receipt of a copy of this QuickLine Open-End Line of Credit Agreement and Federal Disclosure Statement as well as any Additional Disclosure delivered together with this Agreement and agree to and accept their terms.

**MY BILLING RIGHTS: Keep this Notice for future use.**

This notice tells me about my rights and your responsibilities under the Fair Credit Billing Act.

**What To Do If I Find a Mistake on My Statement**

If I think there is an error on my statement, I must write to you at:

Coast Central Credit Union  
2650 Harrison Avenue  
Eureka, CA 95501

I may also contact you via secure e-mail by visiting your website, [www.coastccu.org](http://www.coastccu.org).

In my letter, I must give you the following information:

- *Account information:* My name and Account number.
- *Dollar amount:* The dollar amount of the suspected error.
- *Description of problem:* If I think there is an error on my bill, I must describe what I believe is wrong and why I believe it is a mistake.

I must contact you:

- Within 60 days after the error appeared on my statement.
- At least 3 business days before an automatic payment is scheduled, if I want to stop payment on the amount I think is wrong.

I must notify you of any potential errors in *writing*, or electronically. I may call you, but if I do you are not required to investigate any potential errors and I may have to pay the amount in question.

**What Will Happen After You Receive My Letter**

**When you receive my letter, you must do two things:**

1. Within 30 days of receiving my letter, you must tell me that you received my letter. You will also tell me if you have already corrected the error.
2. Within 90 days of receiving my letter, you must either correct the error or explain to me why you believe the bill is correct.

**While you investigate whether or not there has been an error:**

- You cannot try to collect the amount in question, or report me as delinquent on that amount.
- The charge in question may remain on my statement, and you may continue to charge me interest on that amount.
- While I do not have to pay the amount in question, I am responsible for the remainder of my balance.
- You can apply any unpaid amount against my credit limit.

**After you finish your investigation, one of two things will happen:**

- *If you made a mistake:* I will not have to pay the amount in question or any interest or other fees related to that amount.
- *If you do not believe there was a mistake:* I will have to pay the amount in question, along with applicable interest and fees. You will send me a statement of the amount I owe and the date the payment is due. You may then report me as delinquent if I do not pay the amount you think I owe.

If I receive your explanation but still believe my bill is wrong, I must write to you within *10 days* telling you that I still refuse to pay. If I do so, you cannot report me as delinquent without also reporting that I am questioning my bill. You must tell me the name of anyone to whom you reported me as delinquent, and you must let those organizations know when the matter has been settled between us.

If you do not follow all of the rules above, I do not have to pay the first \$50 of the amount I question even if my bill is correct.



Interest Rates and Interest Charges	
<b>Annual Percentage Rate (APR) for Cash Advances</b>	<b>10.50%</b> This APR will vary with the market based on the Prime Rate.
<b>Paying Interest</b>	I will be charged interest from the transaction date.

Fees	
<b>Set-Up and Maintenance Fees</b>	<b>None</b>
<b>Penalty Fees</b>	
• Late Payment	\$ 10.00
• Returned Payment	\$ 5.00

**How You Will Calculate My Balance:** You will use a method called “average daily balance (including new advances).” I will refer to my account agreement for more details.

**Billing Rights:** Information on my rights to dispute transactions and how to exercise those rights is provided in my account agreement.

### Additional Disclosure Quickline Open-End Line of Credit Agreement and Federal Disclosure Statement

This “Additional Disclosure” is provided together with the Coast Central Credit Union Open-End Line of Credit Agreement and Federal Disclosure Statement.

**Initial Periodic Rate:** 0.0288%

Corresponding initial ANNUAL PERCENTAGE RATE: 10.50%

**Margin:** 5.00%

**Current Index:** 5.50%

**Minimum Payment Amount:**

<u>Loan Balance</u>	<u>Monthly Payment*</u>	<u>Loan Balance</u>	<u>Monthly Payment*</u>	<u>Loan Balance</u>	<u>Monthly Payment*</u>
0 - 500 =	33.00	12,001 - 12,500 =	310.00	28,001 - 29,000 =	725.00
501 - 1,000 =	40.00	12,501 - 13,000 =	325.00	29,001 - 30,000 =	750.00
1,001 - 1,500 =	55.00	13,001 - 13,500 =	335.00	30,001 - 31,000 =	775.00
1,501 - 2,000 =	70.00	13,501 - 14,000 =	350.00	31,001 - 32,000 =	800.00
2,001 - 2,500 =	85.00	14,001 - 14,500 =	360.00	32,001 - 33,000 =	825.00
2,501 - 3,000 =	110.00	14,501 - 15,000 =	375.00	33,001 - 34,000 =	850.00
3,001 - 3,500 =	125.00	15,001 - 15,500 =	385.00	34,001 - 35,000 =	875.00
3,501 - 4,000 =	140.00	15,501 - 16,000 =	400.00	35,001 - 36,000 =	900.00
4,001 - 4,500 =	155.00	16,001 - 16,500 =	415.00	36,001 - 37,000 =	925.00
4,501 - 5,000 =	165.00	16,501 - 17,000 =	430.00	37,001 - 38,000 =	950.00
5,001 - 5,500 =	170.00	17,001 - 17,500 =	445.00	38,001 - 39,000 =	975.00
5,501 - 6,000 =	175.00	17,501 - 18,000 =	455.00	39,001 - 40,000 =	1,000.00
6,001 - 6,500 =	190.00	18,001 - 18,500 =	470.00	40,001 - 41,000 =	1,025.00
6,501 - 7,000 =	200.00	18,501 - 19,000 =	485.00	41,001 - 42,000 =	1,050.00
7,001 - 7,500 =	210.00	19,001 - 19,500 =	500.00	42,001 - 43,000 =	1,075.00
7,501 - 8,000 =	220.00	19,501 - 20,000 =	510.00	43,001 - 44,000 =	1,100.00
8,001 - 8,500 =	225.00	20,001 - 21,000 =	525.00	44,001 - 45,000 =	1,125.00
8,501 - 9,000 =	230.00	21,001 - 22,000 =	550.00	45,001 - 46,000 =	1,150.00
9,001 - 9,500 =	235.00	22,001 - 23,000 =	575.00	46,001 - 47,000 =	1,175.00
9,501 - 10,000 =	250.00	23,001 - 24,000 =	600.00	47,001 - 48,000 =	1,200.00
10,001 - 10,500 =	260.00	24,001 - 25,000 =	625.00	48,001 - 49,000 =	1,225.00
10,501 - 11,000 =	275.00	25,001 - 26,000 =	650.00	49,001 - 50,000 =	1,250.00
11,001 - 11,500 =	285.00	26,001 - 27,000 =	675.00		
11,501 - 12,000 =	300.00	27,001 - 28,000 =	700.00		

\* Monthly Payment is based upon balance after last advance