KS StateBank Business MasterCard®
Application and Agreement

Date of Application _____ Requested By _____ Contact Email _____

COMPANY INFORMATION

Name of Company | Imprint if company name is over 21 characters (including spaces)

Company Mailing Address | City | State | Zip Code

Tax ID Number | Phone | Incorporated in the State of

TYPE OF ORGANIZATION

☐ Sole Proprietor ☐ Partnership ☐ Governmental Organization ☐ Limited Liability Company
☐ Profit Corporation ☐ Nonprofit ☐ Trust

BUSINESS CREDIT CARD – REQUIRED DOCUMENTS BY BUSINESS TYPE

Documents	Nonprofit	Corporation	Partnership	LLC	Proprietorship	Trust
Credit Card Application (signed by appropriate authority)	x	x	x	x	x	x
Entity Tax Return	x	x	x	x	x	x
Articles	x	x		x		
Bylaws	x	x				
Operating Agreement				x		
Partnership Agreement			x			
Trust Agreement or Trust Certificate						x
Minutes stating who owns what percentage, title of all officers, who can sign and how many must sign, if other entity documents do not answer these questions.		x	x	x		x
Guarantor's/Owner's Personal Financial Statement		x	x	x	x	x
Guarantor's/Owner's Tax Return		x	x	x	x	x
ID's - Drivers license, Passport, Resident Alien Card on all owner's above 20%		x	x	x	x	x

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

ADDITIONAL DOCUMENTATION MAY BE REQUIRED. I herby authorize the person to whom this application is made, or any credit bureau or other investigative agency employed by such person, to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility and authorize such persons to release such information to the person to whom this application is made.

THE FEDERAL EQUAL CREDIT OPPORTUNITY): Act requires that all creditors, including banks, savings and loan associations, small loan companies, retail stores and others, make credit equally available to all credit-worthy customers without regard to sex or marital status, race, color, religion, national origin, age (provided applicant has the capacity to contract), receipt of income from a public assistance program and the good faith exercise of rights under the Consumer Credit Protection Act. The Federal Agency which administers compliance with this law concerning this bank is the FDIC Consumer Response Center, 1100 Walnut Street, Box #11, Kansas City, MO 64106.

You have the right to receive from us within 30 days specific written reasons for adverse action taken as a result of an application for credit if you request it within sixty (60) days of such action.

PRINTED NAMES AND SIGNATURES OF INDIVIDUALS AUTHORIZED TO BE CARDHOLDERS *(hereafter, "Cardholders")*

Last Name (print) | First Name | MI
Social Security Number | Date of Birth
Mother's Maiden Name | Phone Number
Signature
Credit Limit | Card Number Issued

Last Name (print) | First Name | MI
Social Security Number | Date of Birth
Mother's Maiden Name | Phone Number
Signature
Credit Limit | Card Number Issued

Last Name (print) | First Name | MI
Social Security Number | Date of Birth
Mother's Maiden Name | Phone Number
Signature
Credit Limit | Card Number Issued

Last Name (print) | First Name | MI
Social Security Number | Date of Birth
Mother's Maiden Name | Phone Number
Signature
Credit Limit | Card Number Issued

KS StateBank Business MasterCard®
Application and Agreement

360CONTROL AGREEMENT

1. _____ ("Company") agrees to be bound by the terms set forth herein and the terms and conditions set forth in the Cardholder Agreement accompanying the card(s) issued by your financial institution. When issued, the card(s) will permit Company to make purchases which will constitute extensions of credit to Company by the financial institution.
2. Company represents and warrants that the information provided herein is accurate and agrees to immediately notify financial institution in writing if any other information changes, or is rescinded or modified in any way, and that all documents previously delivered to financial institution are accurate, complete and current.
3. Company agrees that if a wireless telephone number(s) has (have) been provided, Company consents to receiving autodialed and prerecorded message calls and text messages from the financial institution or its third-party debt collector at that number and have the authority to provide this consent for the wireless number provided.
4. Company consents that an electronic facsimile of its signature, in any capacity, may be used as evidence of Company's agreement to the terms of the Application and this Agreement.
5. Company has taken all action required by its organizational documents to authorize the below-named Company Representatives to act on its behalf in any way and to fully bind the Company.
6. Company will pay all charges as referenced herein and in the Cardholder Agreement, to the extent permitted by law.
7. The specimen signatures set forth herein for each Cardholder is the true signature of said Cardholder.
8. Company agrees to immediately notify financial institution in writing if any of the Cardholders are removed, or if new Cardholders are named.
9. Company has taken all action required by its organizational documents to authorize the Cardholders to act on behalf of Company.
10. If the Company elects to participate in the 360Control Program, the undersigned represents, certifies and warrants to financial institution that:
    a. Company has taken all action required by its organizational documents to authorize the below-named 360Control Administrator(s) to act on behalf of the Company. A 360Control Administrator also has authority to create, modify and delete Cardholders, establish additional 360 Control Administrators, access and manage cards online, request new cards, redeem rewards, and to adjust card limits for the Company.
    b. The specimen signature set forth herein for each 360Control Administrator is the true signature of said 360Control Administrator.
    c. Company agrees to immediately notify financial institution in writing if the 360Control Administrator is removed, or if a new 360Control Administrator is named.

The undersigned Authorized Company Representatives represent and warrants that they have been duly granted all appropriate authority to act on behalf of and to bind the Company to the terms hereof.

AUTHORIZED COMPANY REPRESENTATIVES

This Agreement must be signed by an Authorized Company Representative as verified by current Company minutes, resolution, or:

- All Partners, if a partnership
- Company Owner, if a sole proprietorship
- Governing Board, if a public office account
- At least two authorized officers of a Corporation, unless a lesser number is allowed for in Company corporate documents
- All members or designated manager(s), if an LLC

_____		_____	
Signature	Date	Signature	Date
_____		_____	
Printed Name	Title	Printed Name	Title

360CONTROL ADMINISTRATOR LEVEL ACCESS ☐ Opt Out

It is recommended that at least one Cardholder be set up as a 360 Control Administrator. 360Control Administrators are able to create, modify and delete Cardholders as well as establish additional 360 Control Administrators. A 360Control Administrator also has access to manage cards online, request new cards, redeem rewards and adjust card limits, as permitted, for the Company. Products are subject to underwriting and approval.

_____		_____	
Signature of 360Control Administrator	Date	Signature of 360Control Administrator	Date
_____		_____	
Print Name	Title	Print Name	Title
_____		_____	
360Control Administrator Phone Number	Email Address	360Control Administrator Phone Number	Email Address

FOR OFFICE USE ONLY ☐ New Card ☐ Additional Card

Received By_____ Date Received _____

BL Account _____ CIF Number _____

Documents Verified By_____ Date Received _____

Ordered By _____ Verified By _____

Company Limit Approved _____ Issued/Using _____

OFAC _____ OFAC Date _____

Officer Approval _____ Credit Risk Approval _____

Card Type Approved ☐ Business Classic ☐ Business Gold ☐ Business Platinum

360 Admin Username _____

KS StateBank Business MasterCard®
Disclosure

INTEREST RATES AND INTEREST CHARGES	
Business Classic **Annual Percentage Rate for Purchases** **18.00% APR**	Your Annual Percentage Rate (APR) may vary monthly by adding 11% to the highest "Prime Rate" published in the Money Rates section of the Wall Street Journal. The current rate is **18.00% APR** as of the print date of this disclosure, and may vary.
Business Gold **Annual Percentage Rate for Purchases** **18.00% APR**	Your Annual Percentage Rate (APR) may vary monthly by adding 11% to the highest "Prime Rate" published in the Money Rates section of the Wall Street Journal. The current rate is **18.00%APR** as of the print date of this application, and may vary.
Business Platinum **Annual Percentage Rate for Purchases** **16.00% APR**	Your Annual Percentage Rate (APR) may vary monthly by adding 9% to the highest "Prime Rate" published in the Money Rates section of the Wall Street Journal. The current rate is **16.00% APR** as of the print date of this application, and may vary.
How to Avoid Paying Interest on Purchases	Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases if you pay your entire balance by the due date each month.
Minimum Finance Charge	**$5.00**
FEES	
Transaction Fees	
Foreign Transaction	**1%** fee on all cross-border transactions and on each transaction that is converted to U.S. dollars
Penalty Fees	
Late Payment	**$25.00** The late fee will be assessed when payment is more than 5 days late.
Return Payment	**$25.00**
Other Fees	
Rush Card Fees	**$35.00**

*May vary monthly by adding 11% to the highest "Prime Rate" published in the Money Rates section of the Wall Street Journal. The current Prime Rate is also available on our website, ksstate.bank. This information may change at any time. To find out what may have changed, call us at 800-588-6805 or write us at P.O. Box 1968, Manhattan, KS 66505-1968.

How We Will Calculate Your Balance
We use a method called Average Daily Balance (including new purchases). See your Account Agreement for more details.

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

IMPORTANT
The information set forth in this application was accurate as of September 2026, the date of printing, and is subject to change. For information on any change to the application since it was printed, applicants should call us at 800-588-6805 or write us at P.O. Box 1968, Manhattan, KS 66505-1968.

KS StateBank

MEMBER FDIC | EQUAL HOUSING LENDER

Rev 03/2017

KS StateBank

FACTS WHAT DOES KS STATEBANK DO WITH YOUR PERSONAL INFORMATION?

Why?

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
- Income
- Account balances
- Payment history
- Checking account information
- Wire transfer instructions

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 customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons KS StateBank chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does KS StateBank 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	We don't share
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes - information about your transactions and experiences	No	We don't share
For our affiliates' everyday business purposes - information about your creditworthiness	No	We don't share
For nonaffiliates to market to you	No	We don't share

Questions? Call toll-free at 800-588-6805 or visit us online at ksstate.bank.

What We Do	
How does KS StateBank protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings. We also maintain other physical, electronic and procedural safeguards to protect this information and we limit access to information to those employees for whom access is appropriate.
How does KS StateBank collect my personal information?	We collect your personal information, for example, when you: • Open an account • Apply for a loan • Provide account information • Give us your contact information • Show us your driver's license We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.
Why can't I limit all sharing?	Federal 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 State laws and individual companies may give you additional rights to limit sharing.

Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and non-financial companies. • *KS StateBank does not share with our affiliates.*
Nonaffiliates	Companies not related by common ownership or control. They can be financial and non-financial companies. • *KS StateBank does not share with nonaffiliates so they can market to you.*
Joint Marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. • *KS StateBank doesn't jointly market.*

Other Important Information

This notice is available at any time at ksstate.bank or by calling 800-588-6805.