

# VISA® BUSINESS CREDIT CARD



## Controlled Spending

Manage your company's cash flow conveniently and efficiently with a VISA® Business Card. Its flexibility allows you to preset spending limits for each employee cardholder. Online account information helps you monitor available funds 24/7. Detailed monthly statements and reports itemize your business expenditures to help you track expenses.

## eZBusiness

Our online web tool gives company administrators the ability to better manage your credit cards. Administrators can view all cardholder accounts and statements, make payments, manage credit lines, emulate other company admins or cardholders and much more. To receive more information and an enrollment form, check the box on the application.

## Secure Transactions

Fraud monitoring helps detect suspicious activity early. Visa® Zero Liability protects against unauthorized card use and grants provisional credit.

## Worldwide Acceptance

The Visa® Business Card gives you international buying power. Use it everywhere Visa® is accepted. Purchase office equipment, order supplies online or dine with clients.

## Premium Services\*

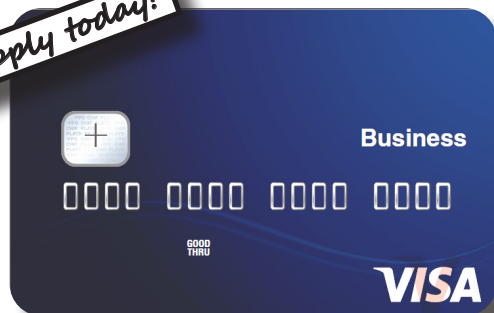
Protect your business with the following Visa® Business Card services:

- Purchase security
- Extended warranty protection
- Auto rental insurance
- Travel and emergency services
- Travel accident insurance up to \$150,000
- AutoPay program
- Online access at mycardstatement.com
- Visa® Zero Liability
- Visa® Liability Waiver

\*Certain restrictions and limitations apply. See the Visa Business Benefits Package for complete details.

*Check box on application to enroll in ScoreCard® Rewards and earn one point for every dollar spent, redeemable for exciting gift and travel packages!*

**Apply today!**



- 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.

# APPENDIX A to § 1010.230 – CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS

## I. GENERAL INSTRUCTIONS

### What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

### Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

### What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of Non-U.S. Persons) for the following individuals (i.e., the **beneficial owners**):

- i. Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); **and**
- ii. An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of “beneficial owner” may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver’s license or other identifying document for each beneficial owner listed on this form.

# VISA Business Card Application



- Check to opt in to Business ScoreCard Rewards
- Check to receive information on eZBusiness

Credit limit requested: \$ \_\_\_\_\_

\_\_\_\_\_  
 Name of business as you would like it to appear on card (Limit 24 spaces)

### Check business type (only one) and submit items listed

- |                                         |                                         |                                              |                                                                                   |
|-----------------------------------------|-----------------------------------------|----------------------------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> Corporation    | <input type="checkbox"/> Partnership    | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Non-profit or Government                                 |
| ____ Letter of reference from your bank | ____ Letter of reference from your bank | ____ Letter of reference from your bank      | ____ Letter of reference from your bank                                           |
| ____ Full year financials               | ____ Full year financials               | ____ Full year financials                    | ____ Full year financials                                                         |
|                                         |                                         |                                              | ____ Finance committee minutes<br>(including authorization to issue credit cards) |

Business Name \_\_\_\_\_ Tax ID# \_\_\_\_\_  
 Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Cell Number \_\_\_\_\_  
 Nature of Business \_\_\_\_\_ Date Business Established \_\_\_\_\_  
 Email Address \_\_\_\_\_ Website \_\_\_\_\_

### Issue Business Credit Cards to the Following Individual Applicants

Name (please print)	Signature	Individual Credit Line Requested
1. _____	X _____	\$ _____
2. _____	X _____	\$ _____
3. _____	X _____	\$ _____

Attach additional sheet if necessary (with signature and credit line requested).

### Credit Information

Bank Name \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Bank Phone Number \_\_\_\_\_  
 Bank Officer \_\_\_\_\_  
 Acct. # \_\_\_\_\_ Avg. Acct. Balance YTD \_\_\_\_\_  
 Trade References \_\_\_\_\_

### Authorizing Officer's Information

Position with Business (check one)  President  VP  Treasurer  Owner  Partner  Member  Other  
 First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ # Years with Business \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Attach additional sheet if necessary (with signatures).

**Business account balances are due and payable in full each month upon receipt of credit card statement.**

**AUTOMATIC PAYMENT OPTION:** If you would like your payment automatically deducted from your checking or savings account, please check here and an automatic payment set-up form will be mailed to you.

**PLEASE READ CAREFULLY BEFORE SIGNING:** This Visa® Business Card application is submitted to obtain credit, and I/We certify that all information herein is true and complete. I/We agree and grant permission that inquiries may be made to verify information and credit references or verification may be given based on inquiries from other parties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Kansas, P.O. Box 20810, Wichita, KS 67208-6810 (BBOK). Offer subject to credit policies of your Financial Institution and BBOK. I/We agree to be bound by the terms and conditions of the **Business Card Agreement**, a copy of which will be mailed to the business applicant if credit is granted. Receipt of such agreement and acceptance of such terms to be conclusively presumed by business' use. If this is a joint business application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. I/We hereby certify and warrant that the statements made by me/us in this certificate are true and correct and that I/we have read the Important Disclosures in this application.

**I/We certify that this business does not engage in Internet gambling pursuant to the Unlawful Internet Gambling Enforcement Act of 2006 as stated in the Disclosures.**

We intend to apply for joint credit. Initials \_\_\_\_\_ and \_\_\_\_\_ .  
 X \_\_\_\_\_  
 Signature of Owner or Authorizing Company Officer \_\_\_\_\_ Date \_\_\_\_\_  
 X \_\_\_\_\_  
 Signature of Owner or Authorizing Company Officer \_\_\_\_\_ Date \_\_\_\_\_

Name of employee who helped you:  
**Bank ID# 527**

## CERTIFICATION OF BENEFICIAL OWNER(S)

**Persons opening an account on behalf of a Legal Entity must provide the following information:**

a. **Name and Title** of Natural Person opening account:

b. **Name, Type, and Address** of Legal Entity for which the account is being opened:

c. The following information for **each** individual\*, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, **owns 25% or more** of the equity interests of the Legal Entity listed above:

	Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number <sup>1</sup>	% of Ownership
1						
2						
3						
4						

\*If no individual meets this definition, please enter "Not Applicable" above and **explain below** (i.e. All <25%; Charity/Non-Profit; etc.):

**Beneficial Owner Detail:** As applicable, explain any layers of Beneficial Ownership, etc. (For example, ABC Co. is 50% owned by 123 Corp. 123 Corp. is 50% owned by John Doe; therefore, John is a 25% Beneficial Owner of ABC Co.)

d. The following information for **one** individual with significant responsibility for managing the Legal Entity listed above:

- An executive officer or senior manager (e.g. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or,
- Any other individual who regularly performs similar functions. (If appropriate, an individual listed under section (c) above may also be listed in this section (d)).

Name/Title	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number <sup>1</sup>

I,  (***name of natural person opening account***), hereby certify, to the best of my knowledge, that the information above is complete and correct. I understand that I am obligated to notify you of any changes.

<sup>1</sup> In lieu of a passport number, Non-U.S. persons may also provide a Social Security Number, an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

## VISA® BUSINESS CARD IMPORTANT DISCLOSURES

<b>Interest Rates and Interest Charges</b>	
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>10.17%</b> <sup>1</sup>
<b>Other APRs</b>	Cash Advance APR <b>21%</b> <sup>2</sup> Default Rate <b>21%</b> <sup>3</sup>
<b>Variable Rate Information</b>	Your APR may vary. The rate is determined on the last day of each month by adding 6.92% to the "Prime Rate." <sup>1</sup>
<b>Grace Period for Purchases</b>	25 Days <sup>4</sup>
<b>Method of Computing the Balance</b>	Average Daily Balance including New Purchases. <sup>5</sup>
<b>Annual Fees</b>	<b>\$29.00</b> for each card. <sup>6</sup>
<b>Transaction Fee for Cash Advance</b>	<b>\$10.00</b> or <b>3%</b> of the amount of each advance, whichever is greater.
<b>International Transaction Fee</b>	<b>3%</b>
<b>Late Payment Fee</b>	<b>Up to \$29</b>
<b>Overlimit Fee</b>	<b>Up to \$29</b>
<b>Return Check Fee</b>	<b>Up to \$29</b>

**Business account balances are due and payable in full each month upon receipt of credit card statement.**

As of the date this application was designed (shown below) the information listed was accurate. Because rates and terms are subject to change, you may contact us for current information by writing to us at **P.O. Box 20810, Wichita, KS, 67208-6810.**

<sup>1</sup> The Prime Rate used to determine your **ANNUAL PERCENTAGE RATE** is the Rate published in the Wall Street Journal under the "Money Rates" subsection on the last business day of the month. If the closing date of the billing cycle is not a business day, then the first business day following the closing date of the billing cycle is used.

<sup>2</sup> **A Finance Charge** will be imposed on cash advanced from the date made, or from the first day of the billing cycle in which the cash advance is posted to your account, whichever is later, and will continue to accrue on the unpaid average daily balance of such cash advances until the date of payment if paid during the same billing cycle, or until the closing date of the billing cycle, or until the closing date of the cycle preceding the date on which the entire New Balance is paid in full or until the date of payment if more than 25 days from the closing.

<sup>3</sup> If your account is or becomes more than 60 days past due at any time, or is otherwise in default in regard to any provision of the **Visa Business Card Agreement**, we may immediately increase the rate to a "Monthly Periodic Rate" of 1.500% (which is a corresponding ANNUAL PERCENTAGE RATE of 21%) effective with the first day of the next billing cycle of your account.

<sup>4</sup> **A Finance Change** will be imposed on Credit Purchases only if you do not pay the entire New Balance shown on your monthly statement for the previous billing cycle within 25 days from the closing date of that statement and a late fee will be charged.

<sup>5</sup> **The Finance Charge** for a billing cycle is computed by applying the Monthly Periodic Rate to the average daily balance of Credit Purchases, which is determined by dividing the sum of the daily balances during the billing cycle by the number of days in the cycle. Each daily balance of Credit Purchases is determined by adding to the outstanding unpaid balance of Credit Purchases at the beginning of the billing cycle any new Credit Purchases posted to your account, and subtracting any payments as received and credits as posted to your account, but excluding any unpaid **Finance Charges**.

<sup>6</sup> See Business Cardholder Agreement for alternatives to avoid said Annual Fee.

**Unlawful Internet Gambling Enforcement Act of 2006**

Transactions restricted by the Unlawful Internet Gambling Enforcement Act of 2006 are prohibited from being processed through this commercial account. You agree that such transactions will not be conducted through your account, and that you will notify Bankers' Bank of Kansas (BBOK) should your account be used for Internet Gambling of any kind. Please be advised that should Bankers' Bank of Kansas discover your account being used for such restricted transactions, we may terminate your access to certain payment systems and/or close your account.

**The Visa Business Card Agreement should be reviewed for all conditions and terms.**

BBOK is card issuer.