To Be Completed By Treas.
Share Balance
Loan Balance
Loan Status

ELECTRICAL WORKERS LOCAL 130-F.C.U.

Credit Union

Account No.	
Note No.	

APPLICATION FOR LOAN

Soc. Sec. No.	
Home Phone	

Name of Applicant (print name)	Stre	et	City	_	State	Zip
I hereby apply for a loan of \$	for a	a period	of	weeks months to	be repaid in	□ weekly □ bi-weekly
installments of \$			each [including	interest	plus interest.	semi-monthly monthly
I prefer the first payment to fall due on		" 1	I desire this loan fo	r the follow	wing purpose (explain	n fully):
Collateral Offered None Shares \$	Αι	uto/Make		I.D. No	D	Year
Other (Describe)						
Owner(s) of Collateral					· · · · · · · · · · · · · · · · · · ·	· / · · · · · · · · · · · · · · · · · ·
Are you relying on income from another person to repay this loan? No Yes Name			You need not disclose the following sources of income; but if you want the credit union to consider such income in connection with this loan application, please complete the following:			
Address	. 11 1 1 1		Alimony \$		Child Support \$_	· · · · · · · · · · · · · · · · · · ·
I am indebted to the following creditors (Li bills, real estate, automobile, repairs, furnitus Attach additional sheet if necessary): Indicate with an "X" those obligations you	re, installments, lo	ans, etc.			ents \$	
of this loan.		Complete the following only if you have chosen to disclose alimony, child support, or separate maintenance income:				
To Whom Owed (Name & Address) A	mount Payment	Balance				
			Employer			
			Date employed		Position _	
			How long have a	limony, chi	ild support or separate	
			ments been mad		? Yes No	
I hereby affirm and represent that my total in			state (Arizona, C Texas or Washing	California, I gton):	y if you reside in a co Idaho, Louisiana, New □ Unmarried □	
on this date are listed above and do not exce						
No. of Dependents (Exclude self)				œ	· · · · · · · · · · · · · · · · · · ·	
Are you liable for alimony, child support payments?			Year	Ser. or Mtr	r. No	
			2nd Auto Owned,	Make		
Employer			Year	Ser. or Mtr	r. No	
Address			Drivers License N	umber	St	ate
Date Employed Date of			Real Estate owned	at reasona	ble market value \$	
Position			Location			
Clock or Office Payroll No. Phone &	Ext				Month	aly Rent \$
Weekly/Monthly Salary \$			List all addresses f	or past five	years	
Previous Employer	-	····				
Length of Service						
Other personal income (do not include a	limony, child suj	pport or				
separate maintenance payments) \$	Source					

Parents or nearest relative (Not spouse)	List Credit References: (If renewal, add new references)				
Name (Relationship)	Name Address				
	Name	Address			
Address	Name	Address			
Have you any Judgments, Garnishments, or Legal Proceedings against you? If "Yes" explain	Bank Reference — Checking & Savings				
Have you ever been through Bankruptcy? Year	Additional Information				
Are you a comaker/guarantor on any other loans?					
Amount \$					
If so, for whom					
I hereby certify that all statements made, including those on the reverse sing credit. I have no other debts.	side hereof, are true and comp	lete and submitted for the purpose of obtain-			
If a co-maker is required, also use co-maker Form CM-2 Rev. 3-77		Dete			
	Signature	Date			
THIS SECTION FOR	OFFICE USE ONLY	Date			
Name		Acct. No			
	or 1 × 1 m 11 m				
Check Made Payable To: Amount	Check Made Payable To:	Amount			
Total Loan \$ Amt. Wanted \$ Te	erms				
Share &	Purpose of Loan:	Auto Finance			
Loan Vaca Total		S.P			
Names of Co-maker(s), Guarantor(s)		Trade			
		Cash			
Share Loan Bal. \$		Dealer			
\$ (2)		Ins			
Collateral		O.B			
Credit Union No Shift	Loan Value	Total			
	Registration Verified by	Yes No			
Remarks					
Information below, including appropriate signature (s), is to be filled in		tee or loan officer, depending upon who acts			
upon this application. On	, 20, (I) (We) approved	a loan in the amount and on the conditions			
requested by the above applicant, except as follows (list any changes in a	amount, terms, or conditions):			
Approved by CREDIT COMMITTEE					
·		— Approved by			
		TOAN OFFICED.			
(All committee members shown as present in the r meeting at which this application was approved shoul	ninutes of the d sign above.)				
If application is rejected — reason for rejection					