Consumer Credit Disclosure

This document is a written disclosure for the sale of in extends credit.	surance or annuities when Cheyenne State Bank
Name of Applicant:	
Type of Credit Transaction:	
To Credit Applicant:	
Cheyenne Sate Bank advises you that Cheyenne State the following:	Bank may not condition the extension of credit on
	n Cheyenne State Bank or any of its affiliates; annuity from an entity not affiliated with Cheyenne
In addition, Cheyenne State Bank may not prohibit you entity not affiliated with Cheyenne State Bank.	a from obtaining insurance or an annuity from an
Insurance and Annuities:	
 Are not insured by the Federal Deposit Insura United States, Cheyenne State Bank or an affi Are not a deposit to or an obligation of Cheye Are not guaranteed by Cheyenne State Bank of May go down in value. 	enne State Bank;
Notice of Negative Info Federal law requires us to provide the following notice may be furnished to a nationwide consumer reporting a concerning delinquencies, late payments, insolvency, o we will be reporting such information about you, only customers that have not done what they are required to	to customers before any "negative information" agency. "Negative information" means information or any for of default. This notice does not mean that that we may report such information about
After providing this notice, additional negative information.	ation may be submitted without providing any other
Please sign to acknowledge the written and verbal rece	ipt of this disclosure.
Signature:	Date:
Signature:	Date:

COVERED BORROWER IDENTIFICATION STATEMENT

Lender: CHEYENNE STATE BANK 101 WEST 19TH STREET CHEYENNE, WY 82001 Federal law provides important protections to active duty members of the Armed Forces and their dependents. To ensure that these protections are provided to eligible applicants, we require you to sign one of the following I AM a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer. APPLICANT: Applicant I AM a dependent of a member of the Armed Forces on active duty as described above, because I am the member's spouse, the member's child under the age of eighteen years old, or I am an individual for whom the member provided more than one-half of my financial support for 180 days immediately preceding today's date. APPLICANT: Applicant Date ---OR---I AM NOT a regular or reserve member of the Army, Navy, Marine Corps, Air Force, or Coast Guard, serving on active duty under a call or order that does not specify a period of 30 days or fewer (or a dependent of such a

ADDI IOANIT.

APPLICANT:

Applicant Date

Warning: It is important to fill out this form accurately. Knowingly making a false statement on a credit application is a crime.

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CREDIT APPLICATION													
IMPORTANT APP and to provide one is protected by our	LICAN or mor privacy	T INFORMATION: re forms of identifica policy and federal	Federa tion to aw.	I law requires financial in fulfill this requirement. In :	stitutions to ob some instance	otain sufficient ir es we may use o	formation to utside source	verify your identites to confirm the in	y. You m nformatio	ay be a	sked sevenformation	eral questions n you provide	
TYPE OF CREDIT REQUESTED IMPORTANT: Check $()$ the appropriate boxes below and complete the applicable sections.							FOR CREDITOR USE DATECLASS NO						
SECURED								ACCOUNT NO.				li li	
SECURED INDIVIDUAL CREDIT - relying solely on my income or assets UNSECURED INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from other sources.						sources.	APPROVED BY						
JOINT CREDIT - We intend to apply for joint credit. (initials)							DECLINED BY						
AMOUNT REQUE	STED	FOR HOW LONG						DS OF LOAN TO BE USED FOR:					
¢					∐ MONTHL	Y							
\$				SECTION A - INDIV	/IDUAL AF	PLICANT IN	I IFORMATI	ION					
NAME (Last, First,	Middle)											
BIRTHDATE	TELEPHONE NO.		DRIVER'S LICENSE NO. S		SOCIAL SECU	DCIAL SECURITY NO.		NO. DEPENDENTS		AGES OF DEPENDENTS			
ADDRESS (Street	DDRESS (Street, City, State & Zip)							COUNTY		Do you or	own rent?	HOW LONG	
PREVIOUS ADDR	ESS (S	Street, City, State & Z	Zip) (Co	mplete if less than 3 years	at present ad	dress)					HOW LONG		
EMPLOYER (Com	pany N	ame & Address)			****							HOW LONG	
BUSINESS PHON	E	Ext.	POSIT	ION OR TITLE				SALARY PER I	MONTH	***************************************			
PDEVIOUS EMBI	OVED	(Company Name &	1 alalan o o	1		GROSS: \$		NET	: \$			THOW LONG	
PREVIOUS EMPL	QYER (Company Name & /	Address	5)								TIOW LONG	
NAME & ADDRES	SOFN	EAREST RELATIVI	E NOT L	LIVING WITH YOU			RELATIONS	SHIP	TELEPH	HONE N	O. (Includ	le Area Code)	
Alimony, child su	pport,	or separate mainte	nance i	ncome need not be reve	ealed if you do	not wish to ha	ve it conside	red as a basis fo	r repayi	ng this o	obligatio	n.	
			receive	d under:	☐ Written A	greement DO	ral Understand	ling	,				
SOURCES OF OTH	IER INC	COME							AMOUI \$	NT PER	MONTH		
Is any income listed in this Section likely to be reduced before the credit request is paid off? No Yes (Explain) Have you previously received credit request is paid off? No Yes - When?						edit from us?							
Complete o	nly if: fo	S or joint gradit, for ind	ECTION	ON B - JOINT APPI credit relying on income o	LICANT OF	ROTHER PA	RTY INFO	RMATION	es in a co	ommunit	v propért	v state	
NAME (Last, First,			IVIGUAL C	steat relying on income of	r assets mont	511101 2021000, 01	applicant lo 1	namod and room			y p.opon.		
BIRTHDATE	TELEF	PHONE NO.		DRIVER'S LICENSE NO	D.	SOCIAL SECU	RITY NO.	O. NO. DEPENDENTS AGES OF I			S OF DE	PENDENTS	
RELATIONSHIP T	O APPI	LICANT (If Any)	PRES	L ENT ADDRESS (Street, C	City, State & Zi	p)	,					HOW LONG	
EMPLOYER (Company Name & Address) HOW LONG										HOW LONG			
BUSINESS PHONE Ext. POSITION OR TITLE				SALARY PER MONTH GROSS: \$ NET: \$									
PREVIOUS EMPLOYER (Company Name & Address)					dn055. \$		NET: \$				HOW LONG		
* *				income need not be reve			ve it conside	ered as a basis fo	or repayi	ng this	obligatio	n.	
Alimony, child support, separate maintenance received under: Court Order Written Agreement Oral Understanding													
SOURCES OF OTHER INCOME AMOUNT PER MONTH \$						WONTH							
Is any income listed in this Section likely to be reduced before the credit requested is paid off?)	Has J	oint Applicant or C	1	ty ever r	eceived o	credit from us?			
□ No □ Yes (Explain) □ No □ Yes - When?													
SECTION C - MARITAL STATUS Complete only if: for joint or secured credit, or applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.													
APPLICANT													
OTHER PARTY		☐ Married		Separated		Unmarried (incl	uding single, o	divorced, and wid	owed)				

SECTION D - ASSET & DEBT INFORMATION

If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Person.

Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section

Please mark Applicant-related	information with an "A". If Se	ction B was not completed, only give informati	on about the App	licant in this Section.	_
(Use separate sheet if necessary	ary.)				
DESCRIPTION OF ASSETS	NAME IN WHICH THE ACCOUNT IS O	CARRIED S	SUBJECT TO DEBT?	VALUE	
CHECKING ACCOUNT NUMBER(S) (where)					\$
SAVINGS ACCOUNT NUMBER(S) (where)	· · · · · · · · · · · · · · · · · · ·				
CERTIFICATE OF DEPOSIT(S) (where)				٠.	
MARKETABLE SECURITIES (issuer, type, no. of shares)	ŕ .				
REAL ESTATE (location, date acquired)					
LIFE INSURANCE (issuer, face value)		·			
AUTOMOBILES (make, model, year)				,	
OTHER (list)		·			
TOTAL ASSETS					\$
ewns:Anding bears (Include charge account	s, installment contracts, c	redit cards, rent, mortgages and other obl	igations. Use se	parate sheet if necessar	y.)
CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINA AMOUN		MONTHLY
LANDLORD OR MORTGAGE HOLDER	Rent Payment Mortgage		(OMIT RE	NT) (OMIT RENT)	PAYMENTS
AUTOMOBILES (describe)	Linestigage		Ψ	\$	\$
· · · · · · · · · · · · · · · · · · ·			_		
TOTAL DEBTS			\$	\$	\$
Complete the follow	ing information about both	n the Applicant and Joint Applicant or Other	er Person (if an	olicable).	
Are you obligated to make Alimony, Support or Mainter			or r oroon (if app	люаые).	
If yes, to (Name & Address)			An	nt. per month \$	· · · · · · · · · · · · · · · · · · ·
Are you a co-maker, endorser, or guarantor on any loa	n or contract? No	Yes If yes, for whom?		To whom?	
Are there any unsatisfied judgments against you? Have you been declared bankrupt in the last 10 years?	No Li Yes If yes, to	whom owed?		Amount \$	
SECTION E - SECURE	D CREDIT Complete on	ly if credit is to be secured. Briefly describe the	Z SAMERIČE VŠE	Yea	r?
PROPERTY DESCRIPTION	a or i a or i prote or i	y in ordan to be secured. Direny describe the	property to be gr	ven as security:	
NAMES & ADDRESSES OF ALL CO-OWNERS OF TH	IE PROPERTY				
F THE SECURITY IS REAL ESTATE, GIVE THE FULL	NAME OF YOUR SPOU	JSE (if any).			
SCW-TURES I certify that everything I have state	ed in this application and	on any attachments is correct. Lender m	ay kaon this	plication whather	it is oppressed 5

I certify that everything I have stated in this application and on any attachments is correct. Lender may keep this application whether or not it is approved. By signing below I authorize Lender to check my credit and employment history and to answer questions others may ask Lender about my credit record with Lender. I understand that I must update credit information at Lender's request if my financial condition changes.