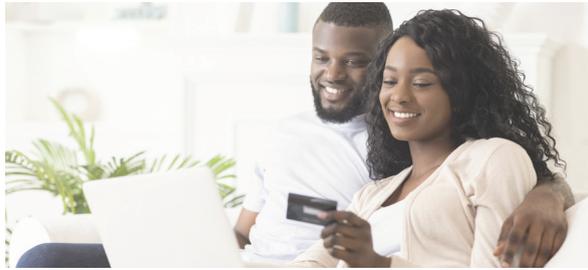


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Earn Bonus Points for every net retail purchase you make with our Jefferson Security Bank Credit Card! You can redeem Bonus Points for cash in the form of statement credit or check, brand-name merchandise and exciting travel awards. Visit www.scorecardrewards.com and browse the current award selections. You'll be amazed at what ScoreCard has to offer! To find out how the plan works, ask one of our friendly representatives.

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- Bonus Travel Dividends
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- Automobile Rental Insurance
- Auto Rental Discount
- Medical Assistance Services
- Travel Protection
 - Lost Luggage Locator Service
 - Lost or Damaged Luggage Insurance
 - Hotel-Motel Burglary Insurance
- Payment Card Registration
- Quarterly Newsletter
- Key Registration



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Interest Rates and Interest Charges		
	Visa® or Visa® Business	Visa® Gold
Annual Percentage Rate (APR) for Purchases	15.00 % Fixed	11.00% Fixed
APR for Balance Transfers	15.00 % Fixed	11.00% Fixed
APR for Cash Advances	15.00 % Fixed	11.00% Fixed
Penalty APR and When it Applies	None	
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on retail purchases if you pay your entire balance by the due date each month. We will begin charging interest on cash advances and/or balance transfers on the transaction date.	
Minimum Interest Charge	None	
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the web site of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore .	
Fees		
	Visa® or Visa® Business	Visa® Gold
Annual Fee	NONE	NONE
Transaction Fees ▪ Balance Transfer ▪ Cash Advances ▪ Foreign Transaction	N/A Up to \$10.00 N/A	
Penalty Fees ▪ Late Payment ▪ Over-the-Credit-Limit ▪ Returned Payment	Up to \$20.00 N/A Up to \$30.00	
Other Fees	None	

How We Calculate Your Balance: We use a method called "average daily balance (including new purchases)."
Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

CREDIT APPLICATION

Check Account Choice: Individual Account Joint Account
 (Signature required for joint applicant) We intend to apply for joint credit
 Applicant Initials _____ Co-Applicant Initials _____
 Credit Line Increase

Credit Limit Requested \$ _____

Check Card Choice <input type="checkbox"/> Visa® <input type="checkbox"/> Visa® Gold <input type="checkbox"/> Visa® Business							
IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an Account. What this means to 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.							
APPLICANT	Last Name		First Name		Middle	Social Security Number	
	Date of Birth	No. of Dependents	Home Phone	Cell Phone		Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>	Monthly Payment \$
	Current Address		City	State	Zip Code		Now Long (yrs)
	Mailing Address (if different from above)		City	State	Zip Code		Now Long (yrs)
	Previous Address (if less than 2 years at present address)		City	State	Zip Code		Now Long (yrs)
	Employer		Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Work Phone	Date Employed	
	Address		Position / Occupation			Monthly Gross Income \$	
	Name and Address of Previous Employer (if less than 2 years at present employer)					Now Long (yrs)	
	Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining credit worthiness					Amount per Month \$	
	Nearest Relative (Not Living With You)					Relationship	
CO-APPLICANT	Last Name		First Name		Middle	Social Security Number	
	Date of Birth	No. of Dependents	Home Phone	Cell Phone		Own <input type="checkbox"/> Rent <input type="checkbox"/> Other <input type="checkbox"/>	Monthly Payment \$
	Current Address		City	State	Zip Code		Now Long (yrs)
	Previous Address (if less than 2 years at present address)		City	State	Zip Code		Now Long (yrs)
	Employer		Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Work Phone	Date Employed	
Address		Position / Occupation			Monthly Gross Income \$		
CREDIT INFO	Name and Address of Creditor		Name under Which Account is Carried		Account Number	Balance	Monthly Payment
	1. Home Mortgage/ Rent						
	2. Bank Credit Card/Bank Name and Address						
SIGNATURES	PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/we agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of this institution. I/we agree to be bound by the terms and conditions of the cardholder agreement, a copy of which will be mailed to the applicant if this application is granted, receipt of such agreement and acceptance of such terms to be conclusively presumed by the applicant's use. If you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.						
	X _____ Applicant Signature		Date		X _____ Applicant Signature		Date
TRANSFER OF BAL REQUEST	Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account. <input type="checkbox"/> Credit Card Account Number _____ Amount to be transferred \$ _____ Signature _____						
	Visa Account No. _____						
FOR INTERNAL USE ONLY	Date Approved		Credit Line			Approved By	

Jefferson Security Bank, Shepherdstown WV 25443-0035 FOLD AND SECURE WITH TAPE FOR MAILING

All contents including rates and premiums are accurate as of April 2023. This information may change after that date. For changes, please call (304) 876-9215 or send a letter to P.O. Box 35, Shepherdstown, WV 25443