

THE MIDDLEFIELD BANKING COMPANY 15985 EAST HIGH STREET, P.O. BOX 35 MIDDLEFIELD,OHIO 44062

LAR □ YES □ NO

				CREDIT A											
IMPORTANT APPLICANT INFORMATION: Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and tederal law.															
TYPE OF CREDIT REQUESTED									FOR CREDITOR USE						
IMPORTANT: Check (w) the appropriate boxes below and complete the applicable sections.									E CLASS NO COUNT NO						
									INED BY						
AMOUNT REQUESTED FOR HOW LONG PAYMENT DATE DESIRED WANT TO REPAY PROCEEDS OF LOAN TO BE USED FO								E USED FOR:							
		SEC	ΓΙΟΝ Α -	INDIVIDUAL	APE	PPLICANT	INF	ORM	ΔΤΙ	NC					
SECTION A - INDIVIDUAL APPPLICANT INFORMATION NAME (Last, First, Middle)															
BIRTH DATE	TELEPHONE NO.		DRIVER'S LICENSE NO.			SOCIAL SECURITY NO.			NO. OF DEP.		AGES OF DEPENDENTS				
ADDRESS (Street,	RESS (Street, City, State & Zip)									INTY	Do you □ own or □ rent?	HOW LONG			
PREVIOUS ADDRESS (Street, City, State & Zip) (Complete if less than 3 years at present a					sent ad	dress) COUNT			INTY	Do you ☐ own or ☐ rent?	HOW LONG				
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU						RELATIONSHIP TELEPHONE			EPHONE NO. (I	NO. (Include Area Code)					
EMPLOYER (Com	pany Name & Address)											HOW LONG			
BUSINESS PHON	BUSINESS PHONE Ext. POSITION			OR TITLE			HOW OFTEN PAID			TA	KE HOME SALARY PER MONTH				
										HOW LONG					
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Alimony, child support, or separate maintenance received under: □ Court Order □ Written Agreement □ Oral Understanding															
SOURCES OF OTHER INCOME AMOUNT PER MONTH \$															
Is any income lister	d in this Section likely to b	e reduce	d before the	credit request is pa	aid off?						ousl received credi	t from us?			
□ No □ Yes	(Explain)									□ No □ Y	es - When?				
	SECT	ION B	- JOINT	APPPLICAN	NT OF	R OTHER F	PAR	TY IN	IFO	RMATION					
	if: for joint credit, for indi	vidual cr	edit relying o	on income or asset	s from c	other sources, o	r appli	cant is	marri	ed and resides i	n a community pro	perty state.			
NAME (Last, First,	Middle)														
BIRTH DATE	TELEPHONE NO.		DRIVER'S LICENSE NO.			SOCIAL SECURITY NO.			NO. OF DEP.		AGES OF DEPENDENTS				
ADDRESS (Street, City, State & Zip)						1			COUNTY		Do you □ own or □ rent?	HOW LONG			
RELATIONSHIP TO	O APPLICANT (If any)	PRESI	ENTADDRE	SS (Street, City, Sta	ate & Zip	ip)					or dirent:	HOW LONG			
EMPLOYER (Company Name & Address)											HOW LONG				
BUSINESS PHONE Ext. POSITION OR TITLE						HOW OFTEN PAID				TAKE HOME SALARY PER MOI					
PREVIOUS EMPLOYER (Company Name & Address)								HOW LONG							
Alimony, child su	pport, or separate maint	enance i	ncome need	not be revealed	if vou d	lo not wish to h	nave it	consid	dered	as a basis for I	epaving this oblig	lation.			
I -	oort, or separate maintena				-	Agreement \Box					3				
SOURCES OF OTHER INCOME AMOUNT PER MON \$							ITH								
							Have you prev	reviously received credit from us? 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.											edit requested.				
APPLICANT	☐ Married ☐	Senar	ited 🗆	I Unmarried (incl.	ıdina eir	nale divorced a	and wic	lowed)							
APPLICANT															

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.

ASSETS OWNED (Use separate sheet if nec	essary.)							
DESCRIPTION OF ASSI	ETS	NAME IN WHICH THE ACCOUNT IS CARR	IED SU	SUBJECT TO DEBT?			VALUE	
CHECKING ACCOUNT NUMBER(S)						\$		
(where)								
SAVING ACCOUNT NUMBER(S)								
(where)								
CERTIFICATE OF DEPOSIT(S)								
(where)								
MARKETABLE SECURITIES								
(issuer, type, no. of shares)								
REAL ESTATE								
(location, date acquired)								
LIFE INSURANCE								
(issuer, face value)								
AUTOMOBILES								
(make, model, year)								
OTHER								
(list)								
TOTAL A005TO						Φ.		
TOTAL ASSETS						\$		
OUTSTANDING DEBTS (Include charge acc	ounts, installment contracts	, credit cards, rent, mortgages and other obligation	ns. Use sep	oarate sh	neet if necess	sary.)		
<u> </u>	ACCOUNT	NAME INVALIDA	- CDIONI	· ·			MONTHLY	
CREDITOR	ACCOUNT NUMBER	NAME IN WHICH THE ACCOUNT IS CARRIED	ORIGINAL AMOUNT		PRESENT BALANCE		MONTHLY PAYMENTS	
LANDLORD OR MORTGAGE HOLDER	Rent Payment	THE ACCOUNT IS CARRIED	(OMIT RE		(OMIT REN		(OMIT RENT)	
EANDEON BOTT WOTT GAGE TIGEBETT	☐ Mortgage		\$	· /	\$	`''	\$	
AUTOMOBILES	■ Wortgage		Ψ	- '	Ψ		Ψ	
(describe)								
(describe)								
TOTAL DEBTS			\$		\$		\$	
Complete the	following information abou	t both the Applicant and Joint Applicant or Other I	Person (if app	plicable)):			
Are you obligated to make Alimony, Support or		☐ No ☐ Yes						
If yes, to (Name & Address)							•	
	•	No						
Are there any unsatisfied judgments against yo		If yes, whom owed?						
Have you been declared bankrupt in the last 1		Yes- If yes, where?			Year?			
SECTION E - SECURE	D CREDIT Complete	te only if credit is to be secured. Briefly descri	be the prope	erty to b	e given as s	secur	ity:	
PROPERTY DESCRIPTION								
NAMES & ADDRESSES OF ALL CO-OWNERS	S OF THE PROPERTY							
IF THE SECURITY IS REAL ESTATE, GIVE TH	HE FULL NAME OF YOUR	SPOUSE (if any).						
SICNATURES Locatify that around this at large	ro atatad in this application	and an any attachmenta is served. Very well-	this appliant	tionh -	ther or not !t	io c=	around Pr	
		and on any attachments is correct. You may keep and to answer questions others may ask about my					-	
update credit information at your request if my			5.5GR 100010	~ •••••• yC		and li	.a. i ilidot	

The Ohio Laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Applicant's Signature Date Other Signature (Where Applicable) Date