CREDIT THE WAY IT SHOULD BE. CONVENIENT.

Credit cards shouldn't be complicated. The Fidelity Bank VISA® Platinum Preferred credit card and VISA® Classic credit card offer simplicity and convenience to take the hassle out of shopping, traveling, and paying bills.

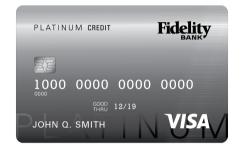
The VISA® Platinum Preferred and VISA® Classic cards make it easy to manage your account safely and effortlessly without complex fees or restrictions. Our VISA® credit cards offer:

- A low variable rate
- No annual fee
- Free online account access
- Worldwide acceptance
- Cash advances at thousands of ATMs
- Automatic payment options
- Auto rental insurance
- Travel accident insurance coverage
- Prompt, friendly service from your local Fidelity Bank

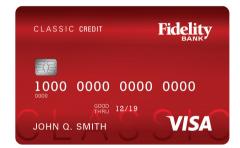
VISA® Platinum Preferred credit cardholders receive these additional benefits:

- Earn one point for every dollar you spend on all purchases
- Redeem earned points for merchandise and travel packages
- No cap on points earned

PLATINUM



CLASSIC



All applicants will be evaluated for the VISA® Platinum Preferred card. Customers who do not meet the Platinum credit criteria will also be evaluated for the VISA® Classic credit card.

Apply for a Fidelity Bank VISA® credit card today.

Bring the completed application form to your local Fidelity Bank office or mail to:

Bankers' Bank of Kansas Servicing Center P.O. Box 20810 Wichita, KS 67208-9767

Please keep the Important Disclosures form for your reference.

Customer Service: 1-800-675-6284











APPLICANT (Please print)

Physical Address City State Zip City	Name		Mother's Maiden N	Name		
Maining Address	(as you want it to appear on your card) Physical Address	City	Sta	ate	Zip	
Length of Residence Own Rent Other Monthly Payment \$ Home Phone { Social Security Number Date of Birth / / Periodic Phone { Social Security Number Date of Birth / / Periodic Phone { Social Security Number Date of Birth / / Periodic Phone { Social Security Number Date of Birth / / Provious Employer of Source of Income* Business Phone () U.S. Citizen Yes No Provious Employer Job Title How Long (yrs.) Rearest Relative running who you want to uppear on your rand) U.S. Citizen Yes No Physical Address City State Zip Williams Ad	·	•			·	
Hone Phone () Social Security Number	· · · · · · · · · · · · · · · · · · ·	,			•	
Cell Phone () Email Address Employer or Source of Income*	•	_				
Employer or Source of Income* Business Phone ()	, ,					
Test 6-motopet; please let reduce of business Annual Income* Business Phone ()	Cell Phone ()	Email Address				
Annual Income* Business Phone ()	Employer or Source of Income*		Job Title		How Long (yrs	S.)
Note that the property Job Title Home Phone Relationship	f self-employed, please list nature of business					
Hame Phone Relative incriture with your paper of the property of the prope	Annual Income*	Business Phone ()			U.S. Citizen Y	es □ No □
Co-APPLICANT Complete if joint account (please print)	Previous Employer	Job Title		How Long (yrs.)	
CO-APPLICANT Complete if joint account (please print) CO-Applicant's Name (as you want to appear on your card) U.S. Citizen Yes No Physical Address City	Nearest Relative (not living with you)	Home Ph	one ()	Relationsh	ip	
City State	Co-Applicant's Name (as you want it to appear on y	our card) City _	;	State	Zip	
Cell Phone ()	(if different from physical address)	City _	;	State	Zip	
Employer or Source of Income*	Home Phone ()					
Self-employed, please ist nature of business Annual Income* Business Phone () LEASE READ CAREFULLY BEFORE SIGNING: This 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 formation and credit references or verification may be given based on inquiries from other perties. At the request of your Financial Institution, this offer is underwritten and serviced by Bankers' Bank of Karasas, P.O. Box 20810, Wichita, K.V. 200-8510 (BiON). Offer subject to credit policies of BBON. I/we agree to be bound by the terms and conditions of the Cardholder Agreement, a copy of which with the mailed to the applicant fire and is granted. Recapit of such greenent and acceptance of such terms to be conclusively presented by applicants use. If this is a join principation, the undersigned shall be jointy and severally liable for any and all credit extended from time to time. We hereby certify and warrant that the statements made by melus are true and correct and that I/we have read the Important Disclosures in this application. Jee intend to apply for joint credit. Initials	Cell Phone ()	Email Address				
LEASEREAD CAREFULLY BEFORE SIGNING: This application is submitted to obtain credit, and live certify that all information herein is true and complete. I/we agree and grant permission that inquiries may be made to verify formation 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 Karsas, P.O. Box 20810, Wichita, Kill progression of the Cardholder Agreement, a copy of which will be maled to the applicant for credit syranted. Receipt of such greement and acceptance of such terms to be conclusively presumed by applicant's use. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We hereby certify and warrant that the statements made by mellus are true and correct and that I/we have read the important Disclosures in this application. 3 We intend to apply for joint credit. Initials and Applicant's Signature	Employer or Source of Income*		Job Title		How Lor	g (yrs.)
**************************************	f self-employed, please list nature of business					
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 Banker's Bank of Kansas, P.O. Box 20810, Wichita, Ki 27309-6810 (BBOK). Offer subject to credit policies of BBOK. If 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 credit is granted. Receipt of such gragement and acceptance of such terms to be conclusively presumed by applicant suse. If this is a joint application, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We hereby certify and warrant that the statements made by melus are true and correct and that I/we have read the Important Disclosures in this application. We intend to apply for joint credit. Initials and	Annual Income*	Business Phone ()			_	
TRANSFER OF BALANCE REQUEST: Upon approval, I wish to transfer the current balance on the credit account(s) listed below to my new credit account, up to my credit limit. Please send a copy of your last credit card statement for each of the accounts indicated below. Please allow 30 days for payment to be received. Continue making payments to your other creditor until the balance transfer is complete to avoid any late fees. VISA Account No	information and credit references or verification may be given 67208-6810 (BBOK). Offer subject to credit policies of BBOH agreement and acceptance of such terms to be conclusively I/We hereby certify and warrant that the statements made by We intend to apply for joint credit. Initials	a based on inquiries from other parties. At the request of you K. I/we agree to be bound by the terms and conditions of the presumed by applicant's use. If this is a joint application, the me/us are true and correct and that I/we have read the Impo and .	r Financial Institution, this offer is underwritten and servi **Cardholder Agreement*, a copy of which will be r undersigned shall be jointly and severally liable for any a rtant Disclosures in this application. **X	iced by Bankers' mailed to the app	Bank of Kansas, P.O. Boo licant if credit is granted. ended from time to time.	20810, Wichita, KS
TRANSFER OF BALANCE REQUEST: Upon approval, I wish to transfer the current balance on the credit account(s) listed below to my new credit account, up to my credit limit. Please send a copy of your last credit card statement for each of the accounts indicated below. Please allow 30 days for payment to be received. Continue making payments to your other creditor until the balance transfer is complete to avoid any late fees. VISA Account No						
f 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.	statement for each of the accounts indicated below. Please a VISA Account No. MasterCard Account No.	allow 30 days for payment to be received. Continue making p	payments to your other creditor until the balance transfer X			d
Name of Employee Who Helped You:			automatic payment set-up form will be mailed to you.]		
	Name of Employee Who Helped You:		BANK ID#. 776			

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IMPORTANT DISCLOSURES

As of the date in the lower right corner of this application, the information listed was accurate. Because rates and terms are subject to change, you may contact us for the current information by writing to us at P.O. Box 20810, Wichita, KS 67208-6810 or email us at ccinfo@bbok.com.

The *Cardholder Agreement* should be reviewed for all conditions and terms.

BBOK is card issuer.

NO ANNUAL FEE!

Interest Rates and Inte	erest Charges		
Annual Percentage Rate (APR) for Purchases	11.17% for Platinum 13.67% for Classic When you open your account, based on your creditworthiness. Your APR will vary with the market based on the Prime Rate.*		
APR for Balance Transfers	Same as Purchase Rate.		
APR for Cash Advances	18.00%		
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will begin charging interest on cash advances on the transaction date. We will not charge you interest on purchases if you pay your entire balance by the due date each month.		
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 website of the Consumer Financial Protection Bureau at: http://www.consumerfinance.gov/learnmore		
Fees			
Annual Fees	None		
Transaction Fees	None Either \$5 or 2% of the amount of each advance, whichever is greater. 2% of U.S. dollar amount of the transaction.		
Penalty Fees Late Payment Returned Payment	■ Late Payment Up to \$25		

Effective October 3, 2017, Federal law provides important protections to members of the Armed Forces and their dependents relating to extensions of consumer credit. In general, the cost of consumer credit to a member of the Armed Forces and his or her dependent may not exceed an annual percentage rate of 36 percent. This rate must include, as applicable to the credit transaction or account: The costs associated with credit insurance premiums; fees for ancillary products sold in connection with the credit transaction; any application fee charged (other than certain application fees for specified credit transactions or accounts); and any participation fee charged (other than certain participation fees for a credit card account). Call 1-888-675-6332 for recorded information.

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)."

*In the event you do not qualify for a Platinum Preferred card, we will automatically consider you for our Classic card. Your Rate on purchases is determined by adding 8.42% for Classic or 5.92% for Platinum to the "Prime Rate" published in the Wall Street Journal under the "Money Rates" subsection on the last business day of each month.