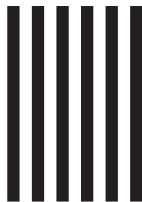


NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 64654 HOLLYWOOD CA

POSTAGE WILL BE PAID BY ADDRESSEE

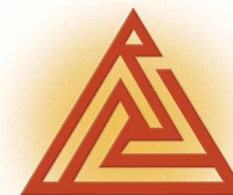
AFTRA-SAG Federal Credit Union  
P.O. Box 11419  
Burbank, CA 91510-9849



**AFTRA-SAG**  
FEDERAL CREDIT UNION

- |                        |  |
|------------------------|--|
| Virtual Branch         | <a href="http://www.aftrasagfcu.org">www.aftrasagfcu.org</a>                                   |
| Burbank Branch         | 4100 Riverside Drive, Suite A<br>Burbank, CA 91505<br>p) 818.562.3400<br>f) 818.562.3463       |
| Sherman Oaks Branch    | 14118 Magnolia Boulevard<br>Sherman Oaks, CA 91423<br>p) 818.562.3400<br>f) 818.562.3490       |
| Los Angeles Branch     | 5757 Wilshire Boulevard #925<br>Los Angeles, CA 90036<br>p) 818.562.3400<br>f) 323.937.9135    |
| Administrative Offices | 134 N. Kenwood Street<br>Burbank, CA 91505<br>p) 818.562.3400<br>f) 818.843.7291               |
| Member Service Center  | p) 818.562.3400<br>p) 800.826.6946 (toll-free)<br>Mon-Thurs: 8am to 5 pm<br>Friday: 8am to 6pm |
| Stellar Teller         | p) 818.260.0609<br>p) 800.392.9321 (toll-free)   |

ALL  
PURPOSE  
LOAN  
APPLICATION



**AFTRA-SAG**  
FEDERAL CREDIT UNION

*Outperforming at every stage.*



ALL PURPOSE

# LOAN APPLICATION

Non-Real Estate Loans Only

**NEW AND USED VEHICLE LOANS** ASFCU can help determine what you can afford, pre-approve your loan and get you pricing information on any vehicle. We offer 100% financing to qualified buyers with terms to 72 months (84 months if amount financed exceeds \$40,000), and our financing includes tax, license, extended warranties, and guaranteed auto protection. We also offer:

- Refinances to transfer an existing loan with another lender to the Credit Union
- Equity Refinances letting you take cash out of equity in your vehicle for any purpose
- Lease Buyouts if you decide to purchase a leased vehicle
- Private Party Purchases with financing up to 100% retail value
- No hassle with available automatic payment from your ASFCU checking or savings account

**PERSONAL LOANS** A great alternative to revolving interest rate credit cards for bill consolidation or large one-time purchases.

- Signature Loans offer fixed rates and are a great way to borrow for any worthwhile purpose or to consolidate existing debt into one, low monthly payment.
- Share-Secured Loans are secured with your Share Savings funds and can help you establish or rebuild your credit. They get the lowest borrowing rate available with the most convenient terms.
- Certificate-Secured Loans allow you to borrow money for any need, up to the term of the certificate.

## LOAN AMOUNT & TYPE

AFTRA-SAG FEDERAL CREDIT UNION ACCOUNT #: \_\_\_\_\_

I WOULD LIKE TO APPLY FOR A LOAN IN THE AMOUNT OF \$ \_\_\_\_\_

FOR THE FOLLOWING TYPE OF LOAN:

- Vehicle with a Downpayment of \$ \_\_\_\_\_
- Personal/Signature Purpose: \_\_\_\_\_

- Share-Secured  Certificate-Secured

DESIRED REPAYMENT OPTION:

- Automatic Transfer  Monthly Self-Pay

APPLICANT STATUS – HOW ARE YOU APPLYING?

ALL APPLICANTS MUST INITIAL SELECTION. FOR JOINT CREDIT WITH A CO-APPLICANT OTHER THAN SPOUSE THE CO-APPLICANT MUST FILL OUT A SEPARATE LOAN APPLICATION

- I wish to apply for Individual Credit Applicant Initials \_\_\_\_\_
- We wish to apply for Joint Credit Applicant Initials \_\_\_\_\_ Co-applicant Initials \_\_\_\_\_

ANSWER ONLY IF YOU LIVE IN A COMMUNITY PROPERTY STATE (AZ, CA, HI, ID, LA, NV, TX, WA, WI)

- Applicant:  Married  Separated  Unmarried
- Co-Applicant:  Married  Separated  Unmarried

## APPLICANT INFORMATION

FULL NAME OF APPLICANT		LAST NAME (JR., SR., ETC.)	FIRST NAME	INITIAL	SOCIAL SECURITY #	
HOME ADDRESS		STREET	CITY	STATE		ZIP
RESIDENT STATUS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER:				MONTHLY RENT/MORTGAGE \$		TIME AT PRESENT ADDRESS YEARS: MONTHS:
BIRTHDATE (MM/DD/YY)	DRIVERS LICENSE (STATE/NO.#)	HOME PHONE		CELL/PAGER	EMAIL ADDRESS	
NEAREST RELATIVE NOT LIVING WITH YOU		LAST NAME	FIRST NAME	RELATIVE'S HOME PHONE		RELATIVE'S RELATIONSHIP TO YOU
RELATIVE'S HOME ADDRESS		STREET	CITY	STATE		ZIP
(YOUR) EMPLOYMENT <input type="checkbox"/> SELF EMPLOYED <input type="checkbox"/> EMPLOYED BY (NAME OF COMPANY):				WORK PHONE		HOW LONG? YEARS: MONTHS:
POSITION/OCCUPATION				LAST YEAR'S INCOME \$		THIS YEAR'S (YTD) INCOME \$
ADDITIONAL INCOME SOURCE (i.e. Residuals)*				HOW LONG? YEARS: MONTHS:		AMOUNT PER MONTH \$

## CO-APPLICANT INFORMATION

Complete Co-Applicant information here. If you are applying for Individual Credit, but are relying on alimony, child support, or separate maintenance, or on the income or assets of another person as the basis for repayment of the credit requested, complete the Co-Applicant information section below to the extent possible

FULL NAME OF CO-APPLICANT		LAST NAME (JR., SR., ETC.)	FIRST NAME	INITIAL	SOCIAL SECURITY #	
HOME ADDRESS		STREET	CITY	STATE		ZIP
RESIDENT STATUS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER:				MONTHLY RENT/MORTGAGE \$		TIME AT PRESENT ADDRESS YEARS: MONTHS:
BIRTHDATE (MM/DD/YY)	DRIVERS LICENSE (STATE/NO.#)	HOME PHONE		CELL/PAGER	EMAIL ADDRESS	
NEAREST RELATIVE NOT LIVING WITH YOU		LAST NAME	FIRST NAME	RELATIVE'S HOME PHONE		RELATIVE'S RELATIONSHIP TO YOU
RELATIVE'S HOME ADDRESS		STREET	CITY	STATE		ZIP
(YOUR) EMPLOYMENT <input type="checkbox"/> SELF EMPLOYED <input type="checkbox"/> EMPLOYED BY (NAME OF COMPANY):				WORK PHONE		HOW LONG? YEARS: MONTHS:
POSITION/OCCUPATION				LAST YEAR'S INCOME \$		THIS YEAR'S (YTD) INCOME \$
ADDITIONAL INCOME SOURCE (i.e. Residuals)*				HOW LONG? YEARS: MONTHS:		AMOUNT PER MONTH \$

\* 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.

By signing below, you individually and jointly apply for the loan(s) indicated. You state under penalty of perjury that all information provided is accurate and complete, and that the financial information you have provided fully and fairly reflects your financial condition until you notify AFTRA-SAG Federal Credit Union ("the Credit Union") otherwise in writing. You agree to promptly notify the Credit Union of any material change in the information provided, including change of name, address, and financial condition. You understand that it is a violation of Section 1014, Title 18 of the US Code to make a false statement or overvalue security for the purpose of influencing the actions of a federally insured credit union. You authorize the Credit Union to make inquiries about your credit history and to request financial information from credit reporting agencies, employers, and others as well as to provide information about your credit experience with the Credit Union to other creditors and credit reporting agencies.

X \_\_\_\_\_  
APPLICANT'S SIGNATURE DATE

X \_\_\_\_\_  
CO-APPLICANT'S SIGNATURE DATE