Consumer Credit Application				
IMPORTANT APPLICANT INFORMATION: Federal Law red and to provide one or more forms of identification to fulfil				
provide is protected by our privacy policy and federal law.	i tilis requirement. Ili some	mistances we may use of	atside sources to commit the infor	mation. The information you
Date of Application:	Lender's Name	and Address:	Type of Credit Requested:	
Amount \$	D.		Unsecured Secured	
Payment Date Desired:	NIO		Individual Credit - relying on my income or assets	
Want to repay	BANK		Individual Credit - relying on my income or assets	
Purpose	1655 N 23rd St PO Box 4169		as well as income or assets from other sources.	
Have you applied for credit with us before?	McAllen TX 78502-4169		Joint Credit - We intend to apply for joint credit.	
☐ No ☐ Yes, - When?	(956) 63	31-7890		
SECTION A - Individual Applicant Information (initials)				
Name:	Social Security Number:	Date of Birth:	Day time Phone #:	Alternate Phone #:
	·		·	
Present Address:	City St:	Zip:	County:	How Long:
Drougue Addross	City	7in.	Country	Howlong
Prevous Address:	City St. Zip:		County:	How Long:
Name and address of nearest relative	Relative's Address:		Phone #:	Relationship:
Employer (Company Name)	Employer Address:		Phone #:	Position :
How often paid:	Gross Monthly Income		Net Monthly Income	Length of Employment:
Weekly Bi-Weekly Monthly Other				
Alimony, child support, or separate maintenance	I e income need not be reveal	led if you do not wish to	have it considered as a basis for	I repaying this obligation.
Alimoney, child support, separate maintenance		Court Order	Written Agreement	Oral Understanding
Sources of other income:			-	Amount per month:
Dravious Employer (Company Name)	Buanda - E - 1	over Address:	Dhene #.	Dogities :
Previous Employer (Company Name)	Previous Empl	oyer Address:	Phone #:	Position :
SECTION B - Joint Applicant or Other Party Information				
Name:	Social Security Number:	Date of Birth:	Day time Phone #:	Alternate Phone #:
	Josiai Jesuiit, itaiiizeii		Day ame i none m	/ incernate r none in
Present Address:	City St:	Zip:	County:	How Long:
Prevous Address:	City St:	Zip:	County:	How Long:
Name and address of nearest relative	Relative's	Address:	Phone #:	Relationship:
		7.00.000	There in	neid tionsmp.
Employer (Company Name)	Employer	Address:	Phone #:	Position :
How often paid: Weekly Bi-Weekly Monthly Other	Gross Mont	nly income	Net Monthly Income	Length of Employment:
Alimony, child support, or separate maintenance	income need not be reveal	lad if you do not wish to	have it considered as a basis for	ronaving this obligation
Alimoney, child support, separate maintenance		Court Order	Written Agreement	Oral Understanding
Sources of other income:				Amount per month:
Previous Employer (Company Name)	Previous Empl	oyer Address:	Phone #:	Position :
	CECTION C	Marital Ctatus		
Complete only if for joint or cocured cre		- Marital Status	nto or is rolying on proporty locat	ad in such state
Complete only if: for joint or secured credit, or applicant resides in a community property state or is relying on property located in such state. Applicant Married Separated Unmarried (includes single, divorced and widowed)				
Other Party Married Separated Unmarried (includes single, divorced and widowed)				
SECTION D - Asset & Debt Information				
If Section B has been completed, this Section should be				Porson Plassa mark Applicant
- · · · · · · · · · · · · · · · · · · ·		= = =	tion about the applicant in this So	
Assets Owned	•		utstanding Debts / Monthl	
Cash on hand		Housing:	Rent Own	
Checking Account:		Automobile:		
Savings/Deposit Acct:		# Credit Cards:	Total mo. Pmt:	
Homestead/Residence:		# Personal Loans:	Total mo. Pmt:	
Other Real Estate:				1
Personal Property:	1			†
Other:		Alimony Support o	r Maintenance Payment:	
			zza.ioo i ayinenti	
Total:		Total:		<u> </u>
Are you obligated to make Alimony, Support or Maintenar	nce Payments?	No If Yes, to w	hom:	
Are you a comaker, endorser, or guarantor on any loan or contract? No If Yes, to whom:				
Are there any unsatisfied judgments against you?		No If Yes, to w	hom:	
Have you been declared bankrupt in the last 10 years?		No If Yes, whe	ere:	Year:
SECTION E: Secured Credit (Complete only if the loan is to be secured)				
Briefly describe the property to be given as security and indicate if other have an ownership interest:				
Property Description:				
Names and addresses of all co-owners of the property:				
SIGNATURES - I certify that everything I have stated on 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.				
Applicant's Signature	Date	Applicant's Sign	nature	Date: