

Fax the form from the other side to 715-847-4730, call 800-845-5025 or visit **connexuscu.org/libertymutual**

CONNEX Smile Service

*Auto Loan 3.99% APR is our lowest rate available as of 10/1/2009. Other loan rates and terms available. Your rate may vary based on your individual credit, term and relationship level. Offer valid until 10/30/2009. Loan subject to approval. Rate subject to change. Minimum loan amount is \$3000. Does not apply to home loans, credit cards, or loans currently financed at Connexus. Applies to new loans or refinanced loans from other financial institutions.

Loan Request

Fax completed form to the Credit union at 715-847-4747

Amount Requested \$	Member Number	Purpose of Loan:	Purpose of Loan:	
If applying for a vehicle loan, indicate	ate if the loan is for a: Preappro	val Purchase	Refinance From:	
Appl	licant	_	Co-Applicant	
Name	Date of Birth	Name	Date of Birth	
Address (Residence)	Home Phone	Address (Residence)	Home Phone	
City, State, Zip	Length of Residence (MM/YY)	City, State, Zip	Length of Residence (MM/YY)	
Work Phone (with extension)	Social Security Number	Work Phone (with extension)	Social Security Number	
Employer	Date Employed (MM/YY)	Employer	Date Employed (MM/YY)	
E-Mail Address Marital Status: (Required if living in a community property state: AZ, CA, ID, LA, MN, NV, TX, WA, WI) Married Separated Unmarried We intend to apply for joint credit. [Initials] [Initials] Applicant gross biweekly income before any deduction is \$ Co-applicant gross biweekly income before any deduction is \$ You do not need to include income from alimony, child support, or separate maintenance payments unless you wish it to be considered in determining creditworthiness. \$ (Check One) Rent Mortgage Monthly Payment \$ Comments:		necessary to determine my: (1) curred if different from that shown on the large credit worthiness through any credit all statements made on this applicated debts constitutes a false financial starelief under the Federal Bankruptcy statement under Wis. Stat. sec. 766. interests of the credit union unless pwith a copy of the agreement, staten the obligation to the credit union is X Applicant Signature:	By signing this statement, I authorize my employer to release to the credit union information which is necessary to determine my: (1) current employment status; (2) salary; (3) surname and place of residence if different from that shown on the loan application. I also authorize the credit union to investigate my credit worthiness through any credit bureau including contact with past and present creditors. I certify that all statements made on this application are true and complete. I fully understand that my failure to list all debts constitutes a false financial statement that may void the discharge of this debt in the event I file for relief under the Federal Bankruptcy Act. No provision of a marital property agreement, a unilateral statement under Wis. Stat. sec. 766.59 or a court decree under Wis. Stat. sec. 766.70 adversely affects the interests of the credit union unless prior to the time the credit is extended, the credit union is furnished with a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision when the obligation to the credit union is incurred. X Applicant Signature: X Co-Applicant Signature:	
		CO-APPLICANT. I certify that cre best interest of the marriage or famil 766.55(1).	COMPLETE ONLY IF YOU HAVE A SPOUSE WHO IS NOT A dit being applied for, if granted, will be incurred or obtained in the ly. This statement is made in accordance with Wis. Stat. Sec. Date	