Customer Agreement

I certify that everything stated in this application is correct and complete to the best of my knowledge. I authorize the credit union to verify employment, credit history, prior checking account(s), and obtain a credit report if necessary. The person or persons who have signed this request (the members) hereby request that a Debit Card be issued to each applicant for the account designated. Overdraft protection can be added upon approval. In the event that one or more cards are issued, the member(s) agree:

1 Such card will be used to obtain cash, goods, or services, only if at the time of such use sufficient funds are available on deposit or through overdraft protection to cover such use.

2 A fee may be charged for overdraft protection use.

3 A delay of up to five business days may occur in the recording of any deposits made at the retail facility.

4 The use of this card shall be governed by the printed terms and conditions and such other terms and conditions or amendments thereof, as may be established from time to time by KEE Federal Credit Union and communicated to the members.

Applicant (A) Signature *Date*

Applicant (B) Signature *Date*

EFT Service Conditions

1 KEE Federal's Debit Check Card or other devices which we supply to you are the property of KEE Federal Credit Union and must be retuned to us, or to any person whom we authorize to act as our agent, or to any person who is authorized to honor the Card, immediately according to instructions upon request. The Card may be repossessed any time at our discretion without demand or notice. You cannot transfer your Card or account to another person.

2 Neither we nor merchants authorized to honor the Card will be responsible for the failure or refusal to honor the Card. If a merchant agrees to give you a refund or adjustment, you agree to accept a credit to your account in lieu of a cash refund.

3 The access codes issued to you are for your security purposes. Any code issued to you is confidential. You understand that any join owner you authorize to use an access code may withdraw funds from your account.

"About People, Not Profit."

KEE Federal Credit Union

KEE Debit Card Information

Access your checking account electronically.

KEE Visa Debit Card conveniently offers access to your account 24 hours a day, seven days a week.

Kearney Office
2600 Hwy 30 E.
308.237.5872

Lexington Office
Plum Creek Mall
308.324.1966

TOLL FREE 866.899.8226
www.keefcu.org

KEE Visa Debit Card

It's your money...access it when you want.

Present the card to any merchant who accepts Visa and the amount is automatically deducted from your checking account. You can also make cash withdrawals or ATM deposits. Along with a receipt, transactions will appear in detail on your monthly statement.

Purchase amounts are limited to the amount in your account or overdraft protection. There is a $500 total purchases limit per day. You may withdraw up to $200 at an ATM or Visa affiliated bank each day. Limits may vary according to your credit worthiness. Ask a credit union associate for details if you wish to have these limits increased.

There is a fee for ATM withdrawals from certain machines. Refer to "*ATM Transaction Limitations*".

Make cash withdrawals up to $200 per day from your checking account or make deposits to your account. With each transaction you will receive a receipt from the ATM machine. All ATM transactions are clearly identified on your monthly statement.

ATM Transaction Limitations

* ATM's owned by KEE Federal have unlimited access. Other ATM's listed on our website are free of transaction fees for the first four transactions per month, after which they are $2 per transaction. All transactions on other ATM machines will be charged a fee of $2 per transaction.
* ATM deposits and balance inquiry are transactions.
* Some ATM's may charge a bank-initiated surcharge. We have no control over these charges.

Debit Card Fees

Sorry, sometimes we just must.

* Any transaction that overdraws the share draft account may be assessed a $25 fee.
* All lost or stolen Debit cards are to be reported immediately so cards can be canceled. A $5 fee may be charged for replacement of the card.

Apply Now

Go ahead, everyone's doing it.

* The KEE Debit Card is available with most accounts
* Application necessary to verify specific requirements
* Credit report may be required to verify credit worthiness
* Will be contacted regarding application approval

Debit Card Disclosure

Boring, yet important

This Electronic Funds Transfer Agreement is the contract which covers our rights and responsibilities and yours concerning the Electronic Funds Transfer (EFT) services offered to you by KEE. Electronic funds transfers are electronically initiated transfers of money from your account through the electronic funds transfer services described below. By signing an application or account card EFT services, or using any service each of you, jointly and severally, agree to the terms and conditions in this Agreement and nay amendments for the EFT Services offered.

Member Liability

If your card is stolen, be quick to tell us.

Tell us at once if you believe your Card or any access code has been lost or stolen. Telephoning is the best way of keeping possible losses down. If you tell us within two business day, you cannot lose more than $50 if someone uses your Card without your permission. If you do not tell us within two business days and we can prove that we could have stopped someone from using your Card without permission if you had told us, you could lose as much as $500.

If your statement shows EFT transaction that you did not make, tell us at once. If you do not tell us within sixty days after the statement was mailed to you, you may be liable for the following amounts if we can prove that we could have stopped someone from making the transfers if you told in time; (i) for unauthorized debit card purchase transaction up to the limits set forth above; and (ii) for all other unauthorized EFT transactions-if you fail to satisfy the conditions above; up to the full amount, of any loss incurred after the sixty days. I a good reason (*such as a hospital stay*) kept you from telling us, we will extend the time periods.

Debit Card Application

KEE Account Number _____

Requested Daily Dollar Amount $_____

Applicant (A) _____

Address _____

City/State _____ ZIP _____

Years at this address _____ Own ◯ Rent ◯

Social Security Number _____- _____ - _____

Applicant (B)_____

Address _____

City/State _____ ZIP _____

Years at this address _____ Own ◯ Rent ◯

Social Security Number _____- _____ - _____

1 Institution(s) you've had a checking account:

_____

_____

2 Every been delinquent on liabilities owed?

Yes ◯ No ◯ If yes, explain? _____

3 Been overdrawn in the last 6 months?

Yes ◯ No ◯ If yes, how often? _____

4 Gross monthly income $_____

5 Current Employer (A) _____

Position _____

Years _____ Business Tel _____

Current Employer (B) _____

Position _____

Years _____ Business Tel _____

For Card Processor Use

Approved By _____ Rejected By _____

Date _____ CIS# _____

Card# _____

ATM Limit $_____ POS Limit $_____

OD Protection Limit $ _____