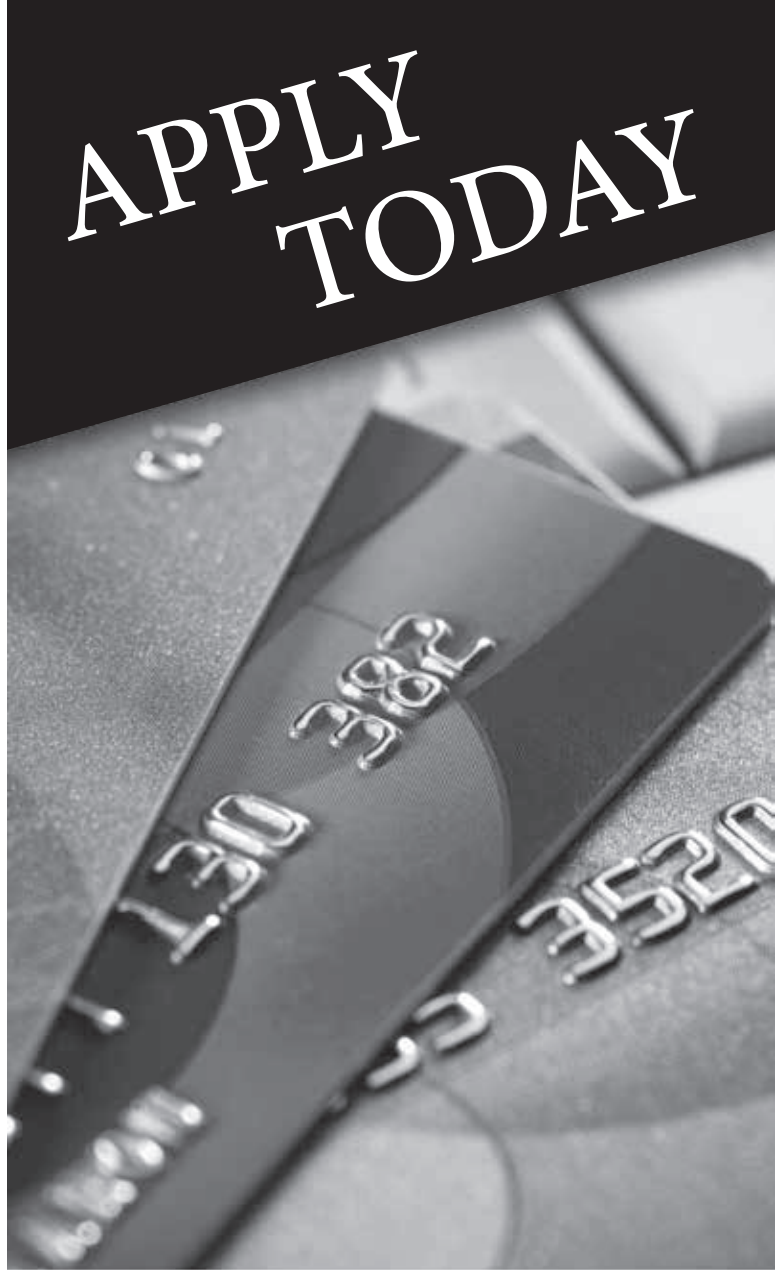


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P.O. Box 938
Jackson, WY 83001



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Building a successful financial plan takes the right resources. That's why we work hard to provide you with quality financial services and products like our convenient Visa Gold & Visa Platinum Cards. They're accepted at thousands of locations worldwide for just about any type of purchase you can dream up. And, unlike those big out-of-town institutions, our cards come with the personal, friendly service you've come to expect from us. So, whatever your plans, choose the credit card that gives you all the value and buying power you need to get your projects off the drawing board.

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Visa® Credit Card for the purchase
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benefits are yours!**

TRAVEL ACCIDENT INSURANCE

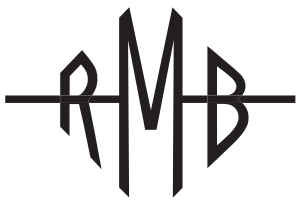
You, your spouse and dependent children up to age 19 (age 25 if a full-time student at any institute of higher learning) are automatically covered with common carrier travel accident insurance every time you travel by air, bus, train, ship, taxi, or any other common carrier anywhere in the world when you charge your entire fare to our card. This coverage is provided to you at NO EXTRA COST.

SCORECARD® BONUS POINTS

Earn Bonus Points with every net retail purchase you make with our Rocky Mountain Bank Visa Gold Credit Card! You can redeem Bonus Points for brand-name merchandise and exciting travel awards. Visit www.scorecardrewards.com and browse the current award selections. You'll be amazed at what ScoreCard® has to offer! To find out how the plan works, ask one of our friendly representatives.

SCORECARD® CASHBACK

Earn CashBack on every purchase with our Rocky Mountain Bank Visa Platinum Cash Back Credit Card. There is no enrollment necessary and your earnings are paid out annually. For more details about CashBack, see one of our friendly representatives.



ROCKY MOUNTAIN BANK



ROCKY MOUNTAIN BANK

Interest Rates and Interest Charges	Visa® Gold	Visa® Platinum
Annual Percentage Rate (APR) for Purchases	16.90% Fixed	16.90% Fixed
APR for Balance Transfers	16.90% Fixed	16.90% Fixed
APR for Cash Advances	18.90% Fixed	18.90% Fixed
Penalty APR and When it Applies	None	
Paying Interest	Your due date is at least 25 days after the close of each billing cycle. We will not charge you any interest on purchases and balance transfers if you pay your entire balance by the due date each month. The Interest Charge on cash advances begins from the date you obtained the cash advance.	
Minimum Interest Charge	None	
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 web site of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore .	
Fees	Visa® Gold	Visa® Platinum
Annual Fee	None	\$95 - Waived the first year
Transaction Fees	None	
• Balance Transfer	None	
• Cash Advances	None	
• Foreign Transaction	Up to 1% of each transaction in US dollars	
Penalty Fees	None	
• Late Payment	Up to \$25	
• Over-the-Credit Limit	None	
• Returned Payment	Up to \$20	
Other Fees	None	

How We Will Calculate Your Balance: We use a method called "average daily balance" (excluding new purchases). * An explanation of this method is provided in your account agreement.
Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.
Military Lending Act: 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).

CREDIT APPLICATION		Check Account Choice:		<input type="checkbox"/> Individual Account <input type="checkbox"/> Joint Account We intend to apply for joint credit Applicant Initials _____ Co-Applicant Initials _____ <input type="checkbox"/> Credit Line Increase				
Credit Limit Requested \$ _____		<input type="checkbox"/> Visa® Gold <input type="checkbox"/> Visa® Platinum						
IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal laws require all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.								
APPLICANT <small>Note: All applicable sections should be filled out completely to avoid delay in processing your application.</small>	Last Name		First		Middle	Social Security Number		
	Date of Birth	No. of Dependents	Home Phone ()	Cell Phone ()	Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Other <input type="checkbox"/>	Monthly Payment \$
	Current Physical Address		City		State	Zip Code	How Long (yrs)	
	Mailing Address (if different from above)		City		State	Zip Code	How Long (yrs)	
	Previous Address (if less than 2 years at present address)		City		State	Zip Code	How Long (yrs)	
	Employer		Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Work Phone ()		Date Employed	
	Address				Position/Occupation		Monthly Gross Income \$	
	Name and Address of Previous Employer (if less than 2 years at present employer)						How Long (yrs)	
	Source of Additional Income: Income from alimony, child support or separate maintenance need not be revealed if it is not considered in determining creditworthiness						Amount per Month \$	
	Nearest Relative (Not Living With You)				Home Phone ()		Relationship	
CO-APPLICANT <small>Intended for joint applicants, this information is required for an individual account.</small>	Last Name		First		Middle	Social Security Number		
	Date of Birth	No. of Dependents	Home Phone ()	Cell Phone ()	Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Other <input type="checkbox"/>	Monthly Payment \$
	Current Physical Address		City		State	Zip Code	How Long (yrs)	
	Previous Address (if less than 2 years at present address)		City		State	Zip Code	How Long (yrs)	
	Employer		Self Employed <input type="checkbox"/> Yes <input type="checkbox"/> No		Work Phone ()		Date Employed	
	Address				Position/Occupation		Monthly Gross Income \$	
CREDIT INFO <small>Attach Additional Sheets if Necessary</small>	Name and Address of Creditor		Name under Which Account is Carried		Account Number	Balance	Monthly Payment	
	1. Home Mortgage/Rent							
2. Bank Credit Card/Bank Name and Address								
SIGNATURES	PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING: This statement is submitted to obtain credit and I/we certify that all information herein is true and complete. I/We agree that inquiries may be made to verify information and that credit references or verification may be given based on inquiries from other parties. This offer is subject to the credit policies of Rocky Mountain Bank. I/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 this application is granted. Receipt of such agreement and acceptance of such terms are to be conclusively presumed by the applicant's use. If you intend to apply for joint credit, the undersigned shall be jointly and severally liable for any and all credit extended from time to time. We may report information about your account to the credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.							
	X _____		X _____		_____			_____
		Applicant Signature		Date		Co-Applicant Signature		Date
TRANSFER OF BAL REQUEST	Upon approval, I wish to transfer my present balance on the credit card account(s) listed below to my new credit card account.							
	<input type="checkbox"/> Credit Card Account Number _____		Amount to be transferred \$ _____					
Signature _____								
FOR INTERNAL USE ONLY	Visa Account No.							
	Date Approved		Credit Line		Approved By			