



P.O. Box 323  
300 E Buffalo St  
Girard, KS 66743  
Office 620-724-8241  
Fax 620-724-8243

### CHARGE ACCOUNT AGREEMENT

Date: \_\_\_\_\_

Name of Credit Patron: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

County

\_\_\_\_\_  
Driver's License No.

\_\_\_\_\_  
Social Security

\_\_\_\_\_  
Telephone Number

THIS AGREEMENT, made and entered on the above stated date by the said Credit Patron and *Producers Cooperative Association* (the "Company"), pursuant to the CUSTOMER Credit Protection Act (Federal Truth in Lending Act, Public Law 90-321; 93 Stat. 146) and the Kansas Uniform Consumer Credit Code (K.S.A. 16(a) 1-101 et seq.).

The Company agrees, if this agreement is approved by the association, that it shall allow the credit patron to purchase goods and services on credit and the credit patron agrees to pay for any goods and services in accordance with this agreement.

- DUE DATE:** All purchases made on credit during the month that are reflected on the periodic billing statement for such month are due and payable upon receipt of the billing statement.
- CONVENIENCE CREDIT:** If all purchases are paid in full before the last day of the month following the month of purchase, the account shall not be subject to any FINANCE CHARGE.
- FINANCE CHARGE:** Any balance not paid before the second billing date, the last day of the month following the month of purchase, shall be subject to a FINANCE CHARGE of 1.5% per month, which is an ANNUAL PERCENTAGE RATE of 18%. Said FINANCE CHARGE to apply to the unpaid balance on the account on the last day of the billing cycle carried over from the prior month, and the minimum amount of such charge shall be \$.50 per month.
- TERMINATION OF CREDIT:** The Company reserves the right to terminate credit sales to patron at any time without prior notification, and in addition thereto, no additional credit purchases will be allowed to any account that is over 30 days past due.
- CHANGE IN TERMS:** This agreement may be changed by the Company to increase the FINANCE CHARGE, change the due date, change the billing cycle, change the method of calculating the FINANCE CHARGE, or change matters of a similar nature within the limitations of applicable law. Notice of any such change shall be given to the patron 30 days prior to the effective date of charge.
- SECURITY FOR ACCOUNT:** Any purchase(s) made pursuant to this agreement may be secured by a separate security interest and lien on any goods sold.
- COLLECTION/ATTORNEY FEES:** Credit patron agrees to pay the reasonable costs of collection, including, but not limited to attorney and collection agency fees (but not both), and court costs, but such fees may not exceed 15% of the unpaid debt after default, in accordance with KSA 16a-2-507, or as hereafter amended.

Until notified in writing to the contrary by the patron, the Company may assume that the patron's spouse, children over the age of sixteen years, and employees, if any, are authorized to purchase goods or services and charge them to the patron's account.

\_\_\_\_\_  
Patron

\_\_\_\_\_  
Patron (spouse or partner)

NOTE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because the applicant has in good faith exercised may right under the Consumer Credit Protection Act. The federal agency that administers compliance with the law concerning this creditor is Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.

Please advise the Company if you wish any credit information regarding this account to be reported in the names of both spouses.

### CREDIT APPLICATION

Name		SS#	
Driver's License Number			
Address		City	
State		Zip	Phone
Directions to your address			

<b>Employer</b>			
Name/Address			
Phone#		Length of Employment	
*Spouse/Partner Name			
Social Security		Driver's License	
Spouse/Partners address			
Phone#			
Spouse/Partner Employer			
Phone#		Length of Employment	

<b>Banking</b>			
Reference		Phone#	
Name on account			
Type of account		Account#	
Credit Reference			
Items you wish to purchase			

Estimated Monthly Purchases    \$ \_\_\_\_\_

Amount of Credit Desired        \$ \_\_\_\_\_

Monthly Income    \$ \_\_\_\_\_                      \*Spouse/Partner    \$ \_\_\_\_\_

*Producers Cooperative Association, Girard, Kansas, offers convenience credit only.*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Spouse/Partner \_\_\_\_\_ Date \_\_\_\_\_

Applicant hereby authorized Company to contact credit-reporting agencies and the above named references, an applicant directs the Reference to provide relevant information to the Company. Applicant agrees that as a condition of extension of credit, the Company may now or may hereafter require Applicant to submit verifiable financial statement(s) to the Company, and Company may further require Security Interest, Letter of Credit, Input Lien, or acceptable Guaranty.

The undersigned submits that he/she has actual authority to hereunto subscribe, and that the information provided above is true and correct.

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Office Use Only	
Approved by _____	Opening Limit _____