

Union State Bank
Sale of Insurance In Connection With Loan Request

I do hereby acknowledge that information regarding the availability of insurance coverage through the bank and/or its affiliate has been provided to me and it has been fully explained that the bank's decision with respect to this loan application is independent of my decision of where to obtain insurance and that insurance coverage is available through other brokers or agents other than the bank and its affiliate.

LOAN NUMBER:

BORROWER SIGNATURE _____

BORROWER SIGNATURE _____

LOAN OFFICER _____

DATE: _____

*All products offered under affiliate Union State Insurance Inc. are:

- 1) Not secured by the FDIC or any other agency of the United States
- 2) Not a deposit or other obligation, or guaranteed by Union State Bank
- 3) Subject to investment risk including possible loss of principal amount or value



FOR BANK USE ONLY:

Did you obtain medical information in connection with this loan? Y or N

If yes, why?