

JOINT APPLICATION ACKNOWLEDGMENT

Applicant:

Lender:

The Iuka State Bank
Salem Banking Center
205 W. Main St.
P.O. Box 1148
Salem, IL 62881
(618) 548-9200

We, the undersigned, intend to apply for joint credit.

APPLICANT(S):

X _____
Applicant Date

X _____
Co-Applicant Date
