

Please open a joint account for myself and my spouse.

Please open an individual account in my name as shown.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Residence Address \_\_\_\_\_ Zip Code \_\_\_\_\_

(P.O. BOX NOT ACCEPTABLE)

Previous Address \_\_\_\_\_

Employment \_\_\_\_\_ Position \_\_\_\_\_ # Yrs \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Dr. Lic. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Nearest Relative Not Living at your Present Address

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Credit Card No. & Type \_\_\_\_\_ Expiration \_\_\_\_\_

**BY SIGNING THIS APPLICATION, YOU AGREE TO THE TERMS BELOW AND ACKNOWLEDGE RECEIPT OF A COPY FOR FUTURE REFERENCE.**

Signature \_\_\_\_\_ If Joint Account Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

SS# \_\_\_\_\_ SS# \_\_\_\_\_

16-A-803 REV. 11.92

### RETAIL CHARGE AGREEMENT

**CROWN CENTER**  
200 East 25th Street  
Kansas City, MO. 64108-2598

**PLAZA**  
211 Nichols Road  
Kansas City, MO. 64112-1581

#### TO OUR CUSTOMER:

We welcome the opportunity to serve you by opening a Halls charge account. If you ever have any question concerning your account, please do not hesitate to contact our credit office.

Your purchases will be billed each month on the closing date indicated by your statement. Your payment is due before the closing date the next month. You may pay the new balance in full or pay part of the new balance. We do, however, require a minimum payment of 10% of the new balance, but not less than \$10. The minimum payment due is always shown on the statement you will receive. If full payment is not made, a **FINANCE CHARGE** will apply. The **FINANCE CHARGE** is computed on the average daily balance which is the average of the outstanding balances on each of the calendar days in the statement billing period, excluding the amounts of a fully paid previous balance and any new purchases. The **FINANCE CHARGE** for any residents in all states is computed at a periodic rate of 1 1/2 % per month (**ANNUAL PERCENTAGE RATE 18%**) on the full average daily balance except as follows:

Residents of:	AR CT PA	AK CA IA MD MS NJ TX VT WV	KS	OVER	MT
Balance (or portion) to which rate applies \$	ALL	500	1,000	1,000	All of the previous balance less current payments and credits
Monthly Periodic Rate(s) %	1.25	1.5	1.5	1.2	1.5
Annual Percentage Rate(s) %	15	18	18	14.4	18

**MINIMUM FINANCE CHARGE ON ALL ACCOUNTS:** If there is any **FINANCE CHARGE**, the minimum **FINANCE CHARGE** will be 50¢ unless you live in AZ, CT, DC, KY, MD, NE, NM, NV, NC, OR, WI, in which case **FINANCE CHARGE** will be assessed by multiplying the average daily balance by the Monthly Periodic Rate.

You must notify us promptly if you move. If your new residence is in another state, our terms in that state will apply after we receive notice of your move.

**COLLECTION COSTS:** I will pay collection costs including reasonable attorney fees and court costs, as permitted by applicable law, if my account is referred to an attorney for collection.

To find out about changes in the information in this application, write to us at Halls Credit Office, P.O. Box 412495, Kansas City, MO. 64141-2495, (816) 274-8222.

**NOTICE: ANY HOLDER OF THIS CONSUMER CREDIT CONTRACT IS SUBJECT TO ALL CLAIMS AND DEFENSES WHICH THE DEBTOR COULD ASSERT AGAINST THE SELLER OF GOODS AND SERVICES PURSUANT HERETO OR WITH THE PROCEEDS HEREOF. RECOVERY HEREUNDER BY THE DEBTOR SHALL NOT EXCEED AMOUNTS PAID BY THE DEBTOR HEREUNDER.**

**NOTICE TO THE BUYER:** 1. Do not sign this Credit Agreement (or use the card) before you read it or if it contains any blank spaces. 2. You are entitled to a completely filled in copy of this Credit Agreement. **KEEP IT TO PROTECT YOUR LEGAL RIGHTS.** 3. You may at any time pay the full indebtedness under this agreement. Application information: This agreement is subject to approval of your application. We can verify this information, check your credit history, and secure follow-up credit reports on you.

You hereby authorize Halls to investigate your credit record and capacity, and that of any co-applicant if this is a joint account, and furnish information concerning this account to proper persons and bureaus. You agree that the terms as described will govern any charge account established for your use. If you have applied for a joint account, you affirm that your spouse has authorized you to do so, and that both of you agree to be bound by these terms.

**CANCELLATIONS AND AMENDMENTS:** Halls can cancel or limit your credit at any time. We can change the terms of this agreement on 30 days notice, including the **FINANCE CHARGE** and **ANNUAL PERCENTAGE RATE**. If you don't agree to the changes, you must notify us in writing, return your card (cards), and pay us the balance under the terms of the unchanged agreement.

**LOST OR STOLEN CARD:** You must call Halls immediately if your card is lost or stolen or if you think someone may use it without your permission. We can cancel your charge account if you fail to notify us immediately. You may be liable for the unauthorized use of your credit card. You will not be liable for unauthorized use that occurs after you notify Halls at P. O. Box 412495, Kansas City, MO 64141-2495, orally or in writing, of the loss, theft, or possible unauthorized use. In any case, your liability will not exceed \$50.

**NOTICE: See reverse side for important information regarding your rights to dispute billing errors.**



**CREDIT REPORTS:** Your performance of this agreement may be reported to credit reporting agencies. No one else will be given that information without proper legal process or your prior approval.

***IN CASE OF ERRORS OR INQUIRES ABOUT YOUR BILL***

The Federal Truth in Lending Act requires prompt correction of billing mistakes.

1. If you want to preserve your rights under the Act, here's what to do if you think your bill is wrong or if you need more information about an item on your bill:
  - a. Do not write on the bill. On a separate sheet of paper write (you may telephone your inquiry but doing so will not preserve your rights under this law) the following:
    - i. Your name and account number.
    - ii. A description of the error and an explanation (to the extent you can explain) why you believe it is an error.  
If you only need more information, explain the item you are not sure about and, if you wish, ask for evidence of the charge such as a copy of the charge slip. Do not send in your copy of a sales slip or other document unless you have a duplicate copy for your records.
    - iii. The dollar amount of the suspected error.
    - iv. Any other information (such as your address) which you think will help the creditor to identify you or the reason for your complaint or inquiry.
  - b. Send your billing error notice to:  
Halls P. O. Box 412495 Kansas City, Missouri 64141-2495  
Mail it as soon as you can, but in any case, early enough to reach the creditor within 60 days after the bill was mailed to you.
2. The creditor must acknowledge all letters pointing out possible errors within 30 days of receipt, unless the creditor is able to correct your bill during that 30 days. Within 90 days after receiving your letter, the creditor must either correct the error or explain why the creditor believes the bill was correct. Once the creditor has explained the bill, the creditor has no further obligation to you even though you still believe that there is an error, except as provided in paragraph 5 below.
3. After the creditor has been notified, neither the creditor nor an attorney nor a collection agency may send you collection letters or take other collection action with respect to the amount in dispute; but periodic statements may be sent to you, and the disputed amount can be applied against your credit limit. You cannot be threatened with damage to your credit rating or sued for the amount in question, nor can the disputed amount be reported to a credit bureau or to other creditors as delinquent until the creditor has answered your inquiry. However, you remain obligated to pay the part of your bill not in dispute.
4. If it is determined that the creditor has made a mistake on your bill, you will not have to pay any finance charges on any disputed amount. If it turns out that the creditor has not made an error, you may have to pay finance charges on the amount in dispute, and you will have to make up any missed minimum or required payments on the disputed amount. Unless you have agreed that your bill was correct, the creditor must send you a written notification of what you owe; and if it is determined that the creditor did make a mistake in billing the disputed amount, you must be given the time to pay which you normally are given to pay undisputed amounts before any more finance charges or late payment charges on the disputed amount can be charged to you.
5. If the creditor's explanation does not satisfy you and you notify the creditor in writing within 10 days after you receive his explanation that you still refuse to pay the disputed amount, the creditor may report you to credit bureaus and other creditors and may pursue regular collection procedures. But the creditor must also report that you think you do not owe the money, and the creditor must let you know to whom such reports were made. Once the matter has been settled between you and the creditor, the creditor must notify those to whom the creditor reported you as delinquent of the subsequent resolution.
6. If the creditor does not follow these rules, the creditor is not allowed to collect the first \$50 of the disputed amount and finance charges, even if the bill turns out to be correct.
7. If you have a problem with property or services purchased on your account, you may have the right not to pay the remaining amount due on them, If you first try in good faith to return them or give the merchant a chance to correct the problem.

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**PRICING INFORMATION ADDENDUM**

<b>Interest Rates and Interest Charges</b>	
<b>Annual Percentage Rate (APR) for Purchases</b>	<b>12%</b> to <b>18%</b> , depending upon your state of residence and the portion of your balance to which the rate applies.
<b>Monthly Periodic Rate</b>	<b>1%</b> to <b>1.5%</b> , depending upon your state of residence and the portion of your balance to which the rate applies.
<b>How to Avoid Paying Interest on Purchases</b>	The due date is 30 days after the close of each billing cycle. No interest is charged on purchases if the entire balance is paid by the due date each month.

<b>Fees</b>	
<b>Annual Fee</b>	None
<b>Transaction Charges</b>	None
<b>Penalty Fees</b>	None

**Balance Computation Method:** “Average daily balance (excluding new purchases),” which is the average of outstanding balances on each of the calendar days in the statement billing period, excluding the amounts of a fully-paid previous balance and any new purchases.