LOS ANGELES POLICE FEDERAL CREDIT UNION

Classic VISA Credit Card Agreement and Federal Truth-In-Lending Disclosure Statement

REVISED FEBRUARY 1, 2010
IMPORTANT DOCUMENT
PLEASE KEEP FOR YOUR RECORDS

LOST OR STOLEN CARDS
(866) 604-0381
(727) 570-4881

Your savings federally insured to at least $250,000 and backed by the full faith and credit of the United States Government

NCUA

National Credit Union Administration, a U.S. Government Agency

Federally Insured by the NCUA

16150 SHERMAN WAY, VAN NUYS, CA 91406
PHONE (877) 695-2732 FAX (818) 787-3273
www.lapfcu.org

In this Classic VISA Credit Card Agreement and Federal Truth-in-Lending Disclosure Statement ("Agreement") the words "I", "me", "my" and "mine" mean each and all of those who apply for, or who sign for or use the Card and/or Account. The words "Credit Union", "LAPFCU", "you", "your", and "yours" mean Los Angeles Police Federal Credit Union. "Card" means the Classic VISA Credit Card(s) issued to me and any duplicates and/or renewals you may issue. "Account" means my Classic VISA Credit Card Account with you.

By requesting and receiving, signing, using or permitting others to use the Card and/or Account issued to me by you, I agree to be bound by the terms and conditions as set forth herein and any amendments and/or change in terms thereto.

AUTHORIZATION AND PAYMENT: I authorize you to pay and charge my Account for all Purchases and Cash Advances made or obtained by me or anyone I authorize to use my Card or Account. I will be obligated to pay all such Purchases and Cash Advances charged to my Account whether resulting from: (1) actual use of my Card or Convenience Checks; (2) mail order or telephone, computer, or other electronic Purchases made without presenting the Card; or (3) any other circumstance where I authorize a charge, or authorize someone else to make a charge, to my Account (collectively, "authorized charges"). I promise to pay you or to your order in U.S. Dollars with an instrument drawn on a financial institution in the United States at your office or at the address set forth on my periodic statement all authorized charges on the terms and at the rates set forth herein, plus any **FINANCE CHARGES** assessed on my Account, and any other charges and fees which I may owe you under the terms of this Agreement (the "Account Balance"). Payments will continue until I have paid in full the Account Balance. To protect me and you, you may, in your sole discretion, place a temporary hold on the credit available to me any time you receive a payment of $1,000 or more from me via a payment method other than cash, certified funds or electronic transfer. In such cases, the hold on my available credit will remain in place until payment is actually collected by you.

CHANGE OF TERMS: Account and agreement terms are not guaranteed for any period of time. I understand and agree that you may amend, modify, add to, or delete from this Agreement any of its terms and conditions, including financial terms such as the method of application and the amount of any **FINANCE CHARGE**, **ANNUAL PERCENTAGE RATE**, monthly periodic rate and/or fee in accordance with applicable laws, by mailing a notice of the change to me at my last known address. I also understand that in the event of a significant change, as defined under the federal Truth in Lending Act, any such notice will be mailed at least forty-five (45) days prior to the effective date of the significant change as required by applicable law. I will have the right to reject significant changes to this Agreement prior to the effective date of such changes, unless I fail to make a required minimum payment within sixty (60) days after its due date. If I reject any such significant change, you reserve the right to close my Account and require me to repay the Account Balance at terms no less favorable to me than your choice of the following: (1) in accordance with the terms of this Agreement in effect as of the date I notify you of my rejection; (2) by recalculating my Minimum Monthly Payment based on a five (5) year amortization of my Account Balance from the date I notify you of my rejection; or (3) by recalculating my Minimum Monthly Payment based on a percentage of the Account Balance that is no more than twice the percentage required on the date I notify you of my rejection. Regardless of whether I reject the significant changes, the new terms will apply to any transactions that occur more than fourteen (14) days after you provide notice of the change in terms to me. You may change the terms of this Agreement based on information in my credit report, market conditions, business strategy or for any other reason. Notice of a change in terms is required, but may be sent as late as the effective date of the change where the change has been agreed to in writing, by me.

FINANCE CHARGES: The **FINANCE CHARGE** for a billing cycle will be the sum of three (3) components set forth below. I understand and agree that under the "Change of Terms" section above, you have the right in your sole and absolute discretion to change the amount of any **ANNUAL PERCENTAGE RATE**, Monthly Periodic Rate and/or **FINANCE CHARGE** that may apply to my Account.

1. Cash Advance Fee: One (1) component of the **FINANCE CHARGE** is the Cash Advance Fee. Cash Advance transactions are subject to a Cash Advance Fee which shall be the greater of $2.00 or 2% of the amount of the advance which is posted to the Account during the billing cycle, but not to exceed $25.00 per Cash Advance. In addition, a Cash Advance Fee may not cause the **FINANCE CHARGE** to exceed the maximum rate permitted for a federal credit union. Cash Advances are subject to the Monthly Periodic Rate (see below) during the billing cycle in which the Cash Advance Fee is imposed.
2. Foreign Transactions Fee: The second (2nd) component of the **FINANCE CHARGE** is the Foreign Transactions Fee. Purchases, Cash Advances, and credit transactions made in foreign currencies are subject to a Foreign Transactions Fee **FINANCE CHARGE** of 1.0% of the amount of the Purchase, Cash Advance, or credit transaction which is posted to the Account during the billing cycle. International Purchases, Cash Advances, and credit transactions that are not made in foreign currencies are subject to a Foreign Transactions Fee **FINANCE CHARGE** of .8% of the amount of the Purchase, Cash Advance, or credit transaction which is posted to the Account during the billing cycle.
3. Monthly Periodic **FINANCE CHARGE,** Monthly Periodic Rate, and **ANNUAL PERCENTAGE RATE** : The third (3rd) component of the **FINANCE CHARGE** is the Monthly Periodic **FINANCE CHARGE**. The initial monthly periodic rate is a discounted monthly periodic rate with an initial discounted **ANNUAL PERCENTAGE RATE,** as disclosed on the enclosed insert. The initial discounted monthly periodic rate will remain in effect during my first six (6) monthly billing cycles unless I fail to make a payment when due or I make a payment that is returned (for further information, please refer to the **PENALTY ANNUAL PERCENTAGE RATE** section below). Thereafter, the Monthly Periodic Rate used in calculating the monthly Periodic **FINANCE CHARGE** and the corresponding **ANNUAL PERCENTAGE RATE** are disclosed on the enclosed insert. The Monthly Periodic **FINANCE CHARGE** is imposed as follows:
   i. Cash Advances: A periodic **FINANCE CHARGE** will be imposed on Cash Advances that I obtain through the use of my Card as of the date of each such Cash Advance and will continue to accrue until the Cash Advance is repaid.
   ii. Credit Purchases of Goods and Services: A periodic **FINANCE CHARGE** will be calculated on credit purchases that I obtain with my Card as of the date such credit purchase is posted to my Account and will continue to accrue until the date of repayment. Periodic **FINANCE CHARGES** will be imposed on credit purchases only if they are not paid in full within twenty-five (25) days after the Statement Closing Date ("Grace Period").

MINIMUM FINANCE CHARGE: A minimum **FINANCE CHARGE** of $0.50 will be assessed whenever a monthly Periodic **FINANCE CHARGE** is imposed.

MONTHLY PERIODIC FINANCE CHARGE, MONTHLY PERIODIC RATE AND ANNUAL PERCENTAGE RATE: The Monthly Periodic **FINANCE CHARGE** for each billing cycle will be calculated by applying the Average Daily Balance (described below) for my Account for the billing cycle by the Monthly Periodic Rate. The Monthly Periodic Rate is determined by dividing the **ANNUAL PERCENTAGE RATE** by 12.

PENALTY ANNUAL PERCENTAGE RATE: A penalty **ANNUAL PERCENTAGE RATE** of 17.90% (corresponding Monthly Periodic Rate of 1.492%) may be applied to my Account Balance if I fail to make a payment when due or I make a payment that is returned. You will provide me notice of such penalty **ANNUAL PERCENTAGE RATE** at least forty-five (45) days prior to the effective date of the penalty **ANNUAL PERCENTAGE RATE**. I will have the right to reject the penalty **ANNUAL PERCENTAGE RATE** prior to the effective date of such penalty **ANNUAL PERCENTAGE RATE**, unless I fail to make a required minimum payment within sixty (60) days after its due date. If I reject the penalty **ANNUAL PERCENTAGE RATE**, you reserve the right to close my Account and require me to repay the Account Balance at terms no less favorable to me than your choice of the following: (1) in accordance with the terms of this Agreement in effect as of the date I notify you of my rejection; (2) by recalculating my Minimum Monthly Payment based on a five (5) year amortization of my Account Balance from the date I notify you of my rejection; or (3) by recalculating my Minimum Monthly Payment based on a percentage of the Account Balance that is no more than twice the percentage required on the date I notify you of my rejection. Regardless of whether I reject the penalty **ANNUAL PERCENTAGE RATE**, such rate will apply to any transactions that occur more than fourteen (14) days after you provide notice of the penalty **ANNUAL PERCENTAGE RATE** to me. My **ANNUAL PERCENTAGE RATE** will revert to the applicable "standard" **ANNUAL PERCENTAGE RATE** provided for in this Agreement, provided that I make six (6) consecutive Minimum Monthly Payments when due.

HOW TO COMPUTE THE CASH ADVANCES BALANCE (CONSISTING OF TRANSACTIONS RELATED TO CASH AND OTHER ADVANCE TRANSACTIONS) UPON WHICH PERIODIC FINANCE CHARGES ARE ASSESSED:

Average Daily Balance (including current Cash Advance transactions): You figure a portion of the **FINANCE CHARGE** on my Account by applying the Monthly Periodic Rate to the Average Daily Balance of Cash Advances (including current Cash Advances). To get the Average Daily Balance of Cash Advance transactions you take the beginning balance of Cash Advance transactions on my Account each day, add any new Cash Advances, and subtract any payments or credits, and unpaid **FINANCE CHARGES**. This gives you the daily balance of Cash Advance transactions. Then, you add up all the daily balances of Cash Advance transactions for the billing cycle and divide the total by the number of days in the billing cycle. This gives you the Average Daily Balance of Cash Advance transactions. There is no grace period in order to avoid the imposition of **FINANCE CHARGES** on Cash Advances. However, the combination of periodic **FINANCE CHARGES**, Cash Advance Fee and Foreign Transactions Fee, will not exceed the **ANNUAL PERCENTAGE RATE** permitted under applicable law.

HOW TO COMPUTE THE PURCHASE BALANCE (CONSISTING OF TRANSACTIONS RELATED TO PURCHASES OF GOODS AND SERVICES) UPON WHICH PERIODIC FINANCE CHARGES ARE ASSESSED:

Average Daily Balance (including current Purchase transactions): To avoid incurring an additional Periodic **FINANCE CHARGE** on the balance of Credit Purchases reflected on my periodic statement and on any new Credit Purchases appearing on my next periodic statement, I must pay the New Balance shown on my statement on or before the Payment Due Date. You figure a portion of the **FINANCE CHARGE** on my Account by applying the Monthly Periodic Rate to the Average Daily Balance of Credit Purchases (including current Purchase transactions). To get the Average Daily Balance of Purchase transactions you take the beginning balance of Purchase transactions on my Account each day, add any new Purchases, and subtract any payments or credits, and unpaid

FINANCE CHARGES. This gives you the daily balance of Purchase transactions. Then, you add up all the daily balances of Purchase transactions for the billing cycle and divide the total by the number of days in the billing cycle. This gives you the Average Daily Balance of Purchase transactions. I have a 25 day grace period from the close of the statement period to pay the New Balance of Purchase transactions without incurring additional **FINANCE CHARGES**. If the New Balance of Purchase transactions is not paid in full during this grace period, **FINANCE CHARGES** will be assessed using the Average Daily Balance method as explained above.

This determines my total periodic **FINANCE CHARGES** for the billing cycle. Actual periodic **FINANCE CHARGES** will be shown on my periodic statement.

CREDIT LIMIT: You will establish a Credit Limit for me. At your discretion, you may increase or decrease my Credit Limit at any time, and may provide separate limits for Purchases and Cash Advances. You will notify me if you do, either by mail or through my periodic statement. If I object to any Credit Limit increase, I must notify you immediately in writing. Upon receipt of such notice, my Credit Limit will be reduced to its prior limit, however, I will be responsible to pay any amounts by which I have exceeded the reduced limit. I agree not to allow my Account Balance to exceed my Credit Limit. I agree to advise you of any change in my financial condition which may affect my creditworthiness. I agree to update the credit information that I have provided you, from time to time, on your demand. I or my joint applicant for the Account may request a change to the Credit Limit orally, in writing, or electronically, but any such request must be approved by you. If my Credit Limit is increased, I am immediately responsible for the new Credit Limit and any increase in the Account Balance even when it differs from an amount previously agreed to orally or in writing.

MINIMUM MONTHLY PAYMENT: Every month, I must pay at least the Minimum Payment Due by the Payment Due Date shown on my periodic statement. By separate agreement, I may authorize you to automatically transfer the Minimum Payment Due from my Credit Union share or share draft account. I may, of course, pay more frequently, pay more, or pay the Account Balance in full, and I will reduce my periodic FINANCE CHARGE by doing so. The Minimum Payment Due will be either: (a) 2% of my Account Balance, or $20, whichever is greater; or (b) my Account Balance, if it is less than $20. In addition, I must pay any amount on my periodic statement listed as past due and any late charge. At any time my Account Balance exceeds my Credit Limit, I must pay the excess.

The "Payment Due Date" will be shown on my periodic statement.

I understand and agree that any Minimum Monthly Payment made by me will be applied in the following order: (a) unpaid fees and charges, if any; (b) unpaid periodic **FINANCE CHARGE** due on both Purchases and Cash Advances; (c) outstanding balances of Cash Advances and Purchases previously billed; and (d) current Cash Advances and Purchases. Any payment I make in excess of the Minimum Monthly Payment will be applied in the following order: (a) my Account Balance subject to a penalty **ANNUAL PERCENTAGE RATE**; (b) my Cash Advance Balance; (c) my Purchases Balance; and (d) any remaining portion of my Account Balance in the order that my Minimum Monthly Payment would be applied.

LATE PAYMENT FEE: If you have not received my Minimum Payment Due within ten (10) days after the "Payment Due Date" listed on my periodic statement, I agree to pay a Late Payment Fee as set forth in the enclosed Schedule of Fees which accompanies this Agreement and is incorporated by reference herein as though set forth in full.

RETURNED PAYMENT FEE: If a payment that was applied to my Account is returned to you unpaid for any reason I agree to pay a Returned Payment Fee as set forth in the enclosed Schedule of Fees. This fee will also apply to any payments made by automatic transfer that cannot be posted due to insufficient funds in my regular share or checking account.

CASH ADVANCE FEE: For each Cash Advance, a Cash Advance Fee of either $2 or 2% of the amount of the Advance will be charged, whichever is greater, subject to a maximum fee of $25 for each Cash Advance transaction. Cash Advance transactions include ATM withdrawals, online funds transfers, telephonic funds transfers, and in person Cash Advances at a financial institution's branch from the Account.

CREDIT LIFE AND/OR DISABILITY INSURANCE: The purchase of this insurance is entirely voluntary and is not a factor in the approval of the extension of credit. If credit life and/or disability insurance is available to me on the Account, and I request it by completing the Credit Insurance Application/Schedule which contains current rates and qualifying information, the premium will be calculated monthly by multiplying the premium rate by the outstanding balance on the Account. You will add the premium amount to my Account Balance on each Billing Cycle Close Date. I acknowledge receiving a copy of the Credit Insurance Application/Schedule.

PREPAYMENT OR IRREGULAR PAYMENTS: Though I need only pay the Minimum Payment Due, I understand that I have the right to repay my Account Balance at any time without penalty. I also understand and agree that I will only be charged periodic **FINANCE CHARGES** to the date I repay my entire Account Balance. I may make larger payments without penalty and this may reduce the total amount of periodic **FINANCE CHARGES** that I will repay. If I pay more than the Minimum Payment Due in any month and there is still a balance due, I must continue to make Minimum Payments in future months. Any partial payment of my Account Balance will not advance my next payment due date(s). I understand and agree that any payment that: (a) delays or (b) accelerates the repayment of my Account Balance will: (a) increase or (b) decrease my Monthly Periodic **FINANCE CHARGE**.

PAYMENTS BY AUTOMATIC TRANSFER: If I request payment by automatic transfer, I understand and agree that no payment can or will be made if there are insufficient or uncollected funds in the designated account to make the scheduled payment. Should this event occur, I understand and agree that I will not be released from making the payment. Any automatic transfer I have requested will remain in effect until I cancel it in writing or the Account Balance is paid in full. You may cancel this service at your discretion.

DEFAULT: I will be in default if: (1) I do not pay on time or in the proper amount(s); (2) I have made a false or misleading statement on my application; (3) I fail to live up to any of the terms of this Agreement; (4) my creditworthiness is impaired; or (5) I die, become insolvent or am the subject of bankruptcy or receivership proceedings. In the event of any action by you to enforce this Agreement, I agree to pay the costs thereof, including reasonable attorneys' fees, and other expenses. I understand and agree that **FINANCE CHARGES** at the **ANNUAL PERCENTAGE RATE** as permitted under this Agreement will continue to accrue until I repay my entire Account Balance.

ACCELERATION AND COLLECTION COSTS: Upon my default, I understand and agree that you have the right to temporarily or permanently suspend any and all Account and Card privileges and/or you may demand immediate payment of the Account Balance, including **FINANCE CHARGES**, Late Payment Fees, and your collection costs, reasonable attorneys' fees, and court costs (collectively "collection-related charges"), and all other fees and charges hereunder. I understand and agree that I will be subject to **FINANCE CHARGES** (at the applicable Monthly Periodic Rate), Late Payment Fees, collection-related charges, and all other fees and charges under the terms disclosed in this Agreement, until I repay my entire Account Balance. In the event of any action by you to enforce this Agreement, I agree to pay the costs thereof, reasonable attorneys' fees, and other expenses.

ELECTRONIC FUND TRANSFER: In the event the use of the Card, the Account or the Account number of the Card constitutes an Electronic Fund Transfer, the terms and conditions of my Electronic Fund Transfer Agreement with you shall govern such transactions to the extent the Electronic Fund Transfer Agreement expands or amends this Agreement.

PURCHASES AND ADVANCES: I may make purchases and request advances in accordance with then current loan policies up to my Credit Limit. I understand and agree that all purchases and other transactions requested by me or anyone I have permitted to use the Card(s) and/or Account are subject to your approval.

USING THE CARD: To make a Purchase or obtain an Advance, I may present the Card or Card number to a participating VISA plan merchant, to you or to another financial institution that accepts Classic VISA Credit Cards and sign or authorize a sales or Cash Advance draft. Certain purchases and Cash Advances will require an authorization prior to completion of the transaction. In some cases, I may be asked to provide identification. If I have received a personal identification number ("PIN"), I may also use my Card and PIN to obtain Cash Advances at any Automatic Teller Machine ("ATM") that accepts my Card or other type of electronic terminal that provides access to the VISA system. (Not all ATMs accept Classic VISA Credit Cards.) My PIN is confidential and should not be disclosed to anyone. I agree not to write my PIN on my Card, I will not keep my Card and PIN together, and I will not provide my PIN to anyone who is not an authorized user. Advances through ATM access will be treated as Cash Advances. Advances at authorized ATMs are limited to a total of $300.00 per day. I may also provide my Card number verbally, electronically, or in writing to a merchant to complete a mail, electronic or telephone transaction.

If your authorized system is not working, I may not be able to authorize a transaction, even if I have sufficient available credit. Occasionally for security reasons, you may block usage of my Card and/or Account in certain foreign countries or geographical areas. You will not be liable to me if any of these events happen.

My Card and/or Account may not be used directly or indirectly for: (1) any illegal activity or transaction; or (2) any gambling, gaming, betting or similar activity or transaction. Further, I may not utilize my Card and/or Account for the purchase of any goods or services on the Internet that involve gambling, betting or any similar activity or transaction. Such transactions include, but may not be limited to, any quasi-cash or online gambling transaction, any electronic commerce transaction conducted over an open network, and any betting transaction including the purchase of lottery tickets or casino gaming chips or off-track betting or wagering. However, in the event that a charge or transaction described in this paragraph is approved and processed, I will still be responsible for such charges.

FOREIGN TRANSACTIONS: Purchases, cash advances and credits made in foreign currencies will be billed to my Account in U.S. dollars. The conversion to U.S. dollars will be made in accordance with the VISA operating regulations for international transactions. Such regulations provide for either a .8% currency exchange fee for single currency transactions (transactions made internationally without a currency conversion) or 1% currency exchange fee for multi-currency international transactions (transactions made internationally that require a currency conversion), which is added to the amount of the purchase, cash advance, or credit and retained by VISA. Transactions conducted in U.S. military bases, territories, embassies, or consulates are not considered international transactions and will not be subject to the .8% currency exchange fee. The exchange rate between the transaction currency and the billing currency used for processing international transactions is a rate selected by VISA from the range of rates available

in wholesale currency markets for the applicable central processing date, which rate may vary from the rate VISA itself receives, or the government-mandated rate in effect for the applicable central processing date. The conversion rate may be different than the rate on the day of the transaction or date of the posting of the Account. When a credit to the Account does not fully offset a charge to the Account due to changes in the rate, I am responsible for the differences.

RESPONSIBILITY: I agree to repay you according to the terms of this Agreement for all purchases, advances, **FINANCE CHARGES**, Late Payment Fees, and all other fees and charges, if any, arising from the use of the Card and/or Account by me or any other person I permit to use the Account, even if that person exceeds my permission. I cannot disclaim responsibility by notifying you, although you will close the Account if I so request and I will return all Cards to you and I will repay the unpaid balance to you. My obligation to pay the Account balance continues even though an agreement, divorce decree or other court judgment to which you are not a party may direct me or one of the other persons responsible to pay the Account. Any person using the Account and/or Card is jointly and severally responsible with me for charges he or she makes, but if that person signs the Card he or she becomes a party to this Agreement and is also responsible for all charges on the Account, including mine. The Cards remain your property and I must recover and surrender to you all Cards upon your request and/or upon termination of this Account.

TRANSACTION SLIPS: My periodic statement will identify the merchant, electronic terminal or financial institution at which transactions were made, but sales, Cash Advances, credit or other slips cannot be returned with the periodic statement. I will retain the copy of such slips furnished at the time of the transaction in order to verify my periodic statement. You may assess a reasonable fee for any photocopies or slips I request.

PLAN MERCHANT DISPUTES: You are not responsible for the refusal of any plan merchant or financial institution or electronic terminal to honor the Account and/or Card. You are subject to claims and defenses (other than tort claims) arising out of goods or services I purchase with the Card only if I have made a good faith attempt but have been unable to obtain satisfaction from the plan merchant, and: (a) my purchase was made in response to an advertisement you sent or participated in sending me; or (b) my purchase cost more than $50.00 and was made from a plan merchant in my state or within 100 miles of my current mailing address. Any other dispute I must resolve directly with the plan merchant.

RETURNS AND ADJUSTMENTS: Merchants and others who honor the Account and/or Card may give credit for returns or adjustments, and they will do so by sending you a credit slip which you will post to my Account. If my credits and payments exceed what I owe you, you will hold and apply this credit balance against future Purchases and Advances, or if it is $1.00 or more, refund it on my written request.

UNAUTHORIZED USE: If I notice the loss or theft of my Card or a possible unauthorized use of my Card, I should write to you immediately at: P. O. Box 10188, Van Nuys, California 91410-0188, or call you at (877) 695-2732. I will not be liable for any unauthorized use that occurs after I notify you. I may, however, be liable for unauthorized use that occurs before my notice to you. In any case, my liability will not exceed $50. My liability may be zero ($0) in cases of VISA Credit Card fraud in accordance with current VISA U.S.A., Inc. Operating Regulations. This does not apply to ATM transactions using the Card and PIN.

SURRENDER OF CARD(S): The Card(s) remains your property and, if you request, I must surrender to you all Cards you have issued on the Account.

LOST OR STOLEN CARD(S) NOTIFICATION AND LIABILITY:
I will notify you AT ONCE by immediately calling you at (866) 604-0381 or, if I am outside the U.S., call collect at (727) 570-4881 if I believe that the Card, Account number, PIN or any combination of the three has been lost or stolen. Telephoning is the best way of keeping my possible losses down. I understand that my total liability to you shall not exceed $50.00 for any Account and/or Card transactions resulting from the loss, theft or unauthorized use of the Account and/or Card that occurs prior to the time I give notice to you. Such liability does not apply when the Account and/or Card is used to make an electronic transfer.

PAYMENTS MARKED "PAID IN FULL": You may accept checks, money orders, or other types of payment marked "payment in full" or using other language to indicate full satisfaction of indebtedness, without being bound by such language or waiving any rights under this Agreement. Full satisfaction of indebtedness shall be accepted by you only in written agreement, signed by an authorized representative of the Credit Union.

DELAY IN ENFORCEMENT: You can delay enforcing any of your rights under this Agreement without losing them.

GOVERNING LAW: I understand and agree that this Agreement is made in California and shall be governed by the laws of the State of California to the extent that California law is not inconsistent with controlling federal law. I also understand and agree that California's choice of law rules shall not be applied if they would result in the application of non-California law.

INTEGRATED DOCUMENT(S): Any separate sheet of paper labeled "Addendum to the Classic VISA Credit Card Agreement and Federal Truth in Lending Disclosure Statement" which is delivered together with this form is an integral part of the Agreement and is incorporated herein as if set forth in full.

MEMBERSHIP REQUIREMENT: I understand and agree that I must be and remain a member in good standing with you to be eligible for continuing Account and/or Card privileges including future purchases and advances. I understand and agree that you may suspend the Account and/or Card privileges during any period in which I do not maintain my membership in good standing with you.

TERMINATION: You may terminate this Agreement upon my default. Either you or I may terminate this Agreement for other good cause. In no event shall any termination relieve me of my obligation to repay sums already borrowed, **FINANCE CHARGES**, Late Payment Fees, and all other fees and charges hereunder, if any. I agree to return all of the Cards issued to me or any party designated by me.

CREDIT INFORMATION: I authorize you to investigate my credit when opening, renewing or reviewing the Account, and I authorize you to disclose information regarding the Account to credit bureaus and other creditors who inquire of you about my credit standing to the extent authorized by law. I understand that you may provide information to credit bureaus about negative information concerning my Account (such as my insolvency, delinquency, late payment or default on my Account) which the credit bureaus may include in my credit report.

CHANGE OF NAME, ADDRESS, EMPLOYMENT STATUS: I understand and agree that I must report to you any change in my name, address, employment status, or any other information that may negatively affect my creditworthiness.

ACCURACY OF INFORMATION: The information provided in my request for credit (Application) is accurate and I will notify you in writing immediately if there is a change in my financial condition. You may retain the Application. I understand that it is a violation of Section 1014, Title 18, US Code to make false statements or over value security for the purpose of influencing the action of any federally insured credit union. You may gather credit and/or employment information you deem necessary and appropriate from time to time and you may give information concerning your credit experience with me to others.

COPY RECEIVED: I acknowledge receipt of a copy of this Agreement and agree to its terms. This Agreement is the contract which applies to all transactions on the Account even though the sales, cash advance, credit or other slips I sign or receive may contain different terms. I understand and agree that all of those who apply for and who sign for or use the Card or the Account agree to and accept the terms and conditions of this Agreement.

NOTICE: See the statement below for important information regarding my right to dispute billing errors.

ADDITIONAL TERMS APPLICABLE TO VISA CHECKS

CHECK USES: I can use the VISA Checks ("Checks" or "Check) to purchase goods and services or to obtain cash up to the amount of my Credit Limit. Use of the Checks is a cash advance on my VISA Account.

LIMITATIONS: You are not required to honor a Check that will cause me to exceed my Credit Limit. You may refuse to pay a Check if at the time the Check is presented, I am in default or you have suspended, terminated or canceled the Account. Each Check must be in the form you have issued me. Checks may be used only by the person(s) whose name(s) is/are printed on the Check. I am responsible for all authorized uses of the Checks. I may not use the Checks to pay any amount which I owe you pursuant to this Agreement.

PERIODIC STATEMENTS: My periodic statement will show me an itemization of the Checks posted to the Account during the billing cycle. Checks paid by you will not be returned to me with my periodic statements.

RETURNED CHECK FEE: You will charge a fee as set forth in the enclosed Schedule of Fees for each returned Check which will be billed to the Account, if my Check cannot be paid.

STOP PAYMENT: Provided such request is timely, so that you have a reasonable opportunity to act upon it under your rules, I may order stop payment on a Check drawn on the Account, other than one that has been guaranteed. In the event of an oral stop payment order, the order shall be valid for only fourteen (14) days thereafter unless confirmed in writing. A written stop payment order will remain in effect only six (6) months unless renewed in writing. I have the burden of establishing the fact and amount of loss resulting from payment contrary to a binding stop payment order. You will charge a fee as set forth in the enclosed Schedule of Fees for each Check when I place a stop payment on my Check(s) which will be billed to the Account.

SURRENDER OF VISA CHECKS: The Checks are your property. You reserve the right to revoke them at any time. I agree to return them at your request.

My Billing Rights: Keep this Document for Future Use

This notice tells me about my rights and your responsibilities under the Fair Credit Billing Act.

What To Do If I Find a Mistake on My Statement

If I think there is an error on my statement, I must write to you at:

Los Angeles Police Federal Credit Union
P. O. Box 10188, Van Nuys, CA 91410-0188

I may also contact you via secure e-mail by visiting the LAPFCU website, www.lapfcu.org, and clicking on "Contact" and "e-mail".

In my letter, I must give you the following information:

• *Account information:* My name and Account number.

• *Dollar amount:* The dollar amount of the suspected error.

• *Description of problem:* If I think there is an error on my bill, I must describe what I believe is wrong and why I believe it is a mistake.

I must contact you:

• Within 60 days after the error appeared on my statement.

• At least 3 business days before an automatic payment is scheduled, if I want to stop payment on the amount I think is wrong.

I must notify you of any potential errors in writing or electronically. I may call you, but if I do you are not required to investigate any potential errors and I may have to pay the amount in question.

What Will Happen After You Receive My Letter

When you receive my letter, you must do two things:

1. Within 30 days of receiving my letter, you must tell me that you received my letter. You will also tell me if you have already corrected the error.
2. Within 90 days of receiving my letter, you must either correct the error or explain to me why you believe the bill is correct.

While you investigate whether or not there has been an error:

• You cannot try to collect the amount in question, or report me as delinquent on that amount.

• The charge in question may remain on your statement, and you may continue to charge me interest on that amount.

• While I do not have to pay the amount in question, I am responsible for the remainder of my balance.

• You can apply any unpaid amount against my credit limit.

After you finish your investigation, one of two things will happen:

• If you made a mistake: I will not have to pay the amount in question or any interest or other fees related to that amount.

• If you do not believe there was a mistake: I will have to pay the amount in question, along with applicable interest and fees. You will send me a statement of the amount I owe and the date the payment is due. You may then report me as delinquent if I do not pay the amount you think I owe.

If I receive your explanation but still believe my bill is wrong, I must write to you within 10 days telling you that I still refuse to pay. If I do so, you cannot report me as delinquent without also reporting that I am questioning my bill. You must tell me the name of anyone to whom you reported me as delinquent, and you must let those organizations know when the matter has been settled between us.

If you do not follow all of the rules above, I do not have to pay the first $50 of the amount I question even if my bill is correct.

My Rights If I Am Dissatisfied With My Credit Card Purchases

If I am dissatisfied with the goods or services that I have purchased with my credit card, and I have tried in good faith to correct the problem with the merchant, I may have the right not to pay the remaining amount due on the purchase.

To use this right, all of the following must be true:

1. The purchase must have been made in my home state or within 100 miles of my current mailing address, and the purchase price must have been more than $50. (Note: Neither of these are necessary if my purchase was based on an advertisement you mailed to me, of if you own the company that sold me the goods or services.)
2. I must have used my credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses my credit card account do not qualify.
3. I must not have fully paid for the purchase.

If all of the criteria above are met and I am still dissatisfied with the purchase, I must contact you in writing or electronically at:

Los Angeles Police Federal Credit Union
P. O. Box 10188, Van Nuys, CA 91410-0188; or
I may contact you via secure e-mail by visiting the LAPFCU website, www.lapfcu.org, and clicking on “Contact” and “e-mail”.

While you investigate, the same rules apply to the disputed amount as discussed above. After you finish your investigation, you will tell me your decision. At that point, if you think I owe an amount and I do not pay, you may report me as delinquent.

ADDENDUM TO CLASSIC VISA® CREDIT CARD AGREEMENT & FEDERAL TRUTH-IN-LENDING DISCLOSURE STATEMENT

Retain for your records

As of February 9, 2010, the non-variable monthly periodic rate for purchases and cash advances in effect for your Classic VISA® Credit Card is 1.1658% with a corresponding **ANNUAL PERCENTAGE RATE** of 13.99%.

NOTE: Recently opened Classic VISA® Credit Card Accounts continue to be subject to the introductory periodic rate of **2.99%** APR as disclosed in the Classic VISA® Credit Card Account Agreement and Federal Disclosure Statement during the first six (6) monthly billing cycles after the account is established. Thereafter, the **ANNUAL PERCENTAGE RATE** (APR) will convert to a non-variable rate.

LOS ANGELES POLICE FEDERAL CREDIT UNION

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LOS ANGELES POLICE FEDERAL CREDIT UNION
SCHEDULE OF FEES

Effective February 9, 2010

CLASSIC VISA® CREDIT CARD ACCOUNTS

Annual Fee	None
Late Payment Fee	$15.00
CLASSIC VISA® Credit Card Loan Check stop payment (per item)	$15.00
CLASSIC VISA® Credit Card Loan Check Returned check Fee (per item)	$22.00
CLASSIC VISA® Credit Card Returned Payment Fee (per item)	$22.00
CLASSIC VISA® Credit Card Statement copy (per copy)	$ 1.00

Thank you for being *partners in a proud tradition*℠.

LOS ANGELES POLICE FEDERAL CREDIT UNION

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