

RAY FEDERAL CREDIT UNION
Better Than Payday Loan Application

Name:	Account Number:
Amount Requested \$ _____	Terms: <input type="checkbox"/> 1 Pay Periods <input type="checkbox"/> 3 Pay Periods
Next Pay Date: _____	<input type="checkbox"/> 2 Pay Periods <input type="checkbox"/> 4 Pay Periods
Circle Pay Frequency Below:	
Weekly Bi-Weekly Monthly Semi-Monthly	
Address:	City: State: Zip:
Home Telephone:	Cell #

- I agree to pay Ray Federal Credit Union a \$25.00 non-refundable application fee.
- I understand that I am responsible to pay the loan in full within one business day of the date due in cash, money order, or certified funds if the amount is not deducted from my check for any reason.
- Failure to do so will disallow me from further Better Than Payday Loans.
- I understand that I cannot apply for another Better Than Payday Loan until this loan is paid in full.

Signature:	Date:
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CREDIT UNION USE ONLY

Required Documents: <input type="checkbox"/> Application Fee <input type="checkbox"/> Payroll Verified	
Loan Approved by:	Date: