

MEMBERSHIP APPLICATION

FEE: \$10.00

(NOTE: This is not an application for credit.)

PLEASE PRINT CLEARLY

Name			Soc. Sec. # or Business I.D. #			
	(First)	(Middle)	(Last)	Dusin	C33 1.D. π	
Mailing Address _			City		State	Zip
Physical Address						
Phone (H)		Driver Lic. #			_ Birth Date	
Phone (C)		FAX		_ E-Mail		
Spouse			Driver License	#		
For partne	erships and corporate	memberships, please provide r	names and addr	esses of all pers	ons or officers:	
		OUALIFICATIO	NC EOD		DCHID	
ducer of a Upon appr ciation's a the memb	agricultural product roval by the Board of nnual membership mo pership will not be a	corporation or association, inc es intended for resale and be Directors, active membership eeting, and to participate in the etivated until a purchase has products intended for resale.	carries full men patronage refu been made.	of supplies and mbership privile nds of the Associ	l/or services off ges, including the ciation. PLEASE	te right to vote at the Asso- E NOTE: Once approved,
To confirm	n the qualifications, p	lease describe the extent of your primary county first)	our agricultural	operation(s):		
)				
	LIVEST(OCK Types or breeds			CROPS	
Cattle			To	tal Crop Acres_	Tota	l Pasture Acres
Horses				CROPS	PRODUCED (Che	ck all that apply)
Swine				Cotton \square	Corn 🗖	Milo 🗖
Sheep			So	oybeans \Box	Wheat	Oats \Box
Goats				Нау 🗖	Vegetables	Fruit/Nuts
Poultry				OTHER \square		OTHER
Exotic				(specify type)		(specify type)
OTHER						

MEMBERSHIP DECLARATIONS and TAXPAYER CERTIFICATION

I have read the qualifications for Membership and do hereby attest that I meet the requirements for the membership class designated in this application. It is understood that if the Board of Directors of Producers Cooperative Association acts favorably upon this application, I will be issued one share of Voting Common Stock, and that such share of stock cannot be transferred to anyone other than the Association.

By signing this instrument, I hereby agree to comply with the Bylaws of the Association and do further understand and consent that the amount of my distribution of patronage refunds, which are made in written notices of allocations, and which are received from this Association, will be taken into account by me and their stated dollar amounts in the manner, as now or hereafter provided in the Federal Tax Laws in the taxable year in which such written notice of allocation is received.

Further, under the penalties of perjury, I certify that: (1) The number shown on this application is my correct tax-payer identification number; and (2) I am not subject to backup withholding either because I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholding (does not apply to real estate transactions, mortgage interest paid, the acquisition or abandonment of secured property, contributions to an Individual Retirement Account (IRA), and payments other than interest and dividends).

Signature	Date	

(FOR OFFICE USE ONLY)

Acct. Type	Acct. #	Stock #	Date Issued