YOUR CHOICE LOAN

FOR OFFICE USE ONLY

Co-op Current Balance:

Years with Co-op:



COOPERATIVE CREDIT

2022 Loan Information										
Counties farmed in		Amount Requested (Min \$2,500			- Max \$350,000) A			Agronomist Name		
			(lf r	request ex	xceeds \$	\$150,000, please fill out page #2)				
Applicant Information						-				
Entity Type						Company Name				
Sole Proprietorship Corporation						Address				
 Sole Proprietorship w/ DBA Limited Liability Company General Partnership Trust 						City				
General Partnership General Partnership Joint Venture										
If Applicant is not an individual, the authorized persons completing this						State Zip				
Application MUST ALSO PROVIDE THEIR NAME AND SOCIAL SECURITY NUMBER. Such persons understand they are also considered to be an						Company Telephone Company Tax ID Number				
Applicant and that they will be required to sign personally as a borrower on						Company Net V	North			
anv loan approved by CCC.						Company Net Worth				
Primary Applicant or Principal Information						Co-Applicant or Principal 2 Information				
Full Legal Name (first, middle, la	ast)					Full Legal Name (first, middle, last)				
Title (if applicable)						Title (if applicable)				
Address						Address				
City	State		Zip			City			State	Zip
Home Phone		Mobile Phone	e			Home Phone			Mobile Phone	
Email Address					Email address					
Social Security Number Date			te of Birth			Social Security Number Date of Birth				
Net Worth (assets minus liabi	lities)	Working Capital				Net Worth V			Working Capital	
Marital Status (married, separated, or unmarried – required for Sole Proprietorship)						Marital Status (married, separated, or unmarried – required for Sole Proprietorship)				
Spouse's Full Legal Name (first, middle, last)						Spouse's Full Legal Name (first, middle, last)				
Spouse's Social Security Number						Spouse's Social Security Number				
Potential Crop Buyer	Informatio	n (other than	Central Farmers	s Coop		e)				
Buyers' Name	Addre	ess			City			State	Zip	Telephone
Any of crops fed to livestock? Yes No										
If yes, approximate % of corn fed to livestock: Collateral Value Calculation										
Commodity		Acres	Total Acres Rente	d	Avera	ge Cash Rent	Ave	erage APH	Coverage Level (%)	Insurance Type
*Insurance Plan: RP, YP, APH, GRIP, GRP, Hail Only, CAT, None										
Crop Insurance Agent Information Agency name Address City State Zip Telephone										
	Audre	500		City				JIGIE	Zip	

The Applicant designated below is requesting financing in the form of a promissory note from **Cooperative Credit Company**, (hereinafter "CCC"), for the purpose of purchasing crop inputs at **Central Farmers Cooperative**, **Marion**, **SD**, (hereinafter "Member") for the **2022** crop year. The Applicant understands all loan advances will be made payable to the Member and not to any other party. This document authorizes the release to **Cooperative Credit Company**, **128 Third Street NW**, **PO Box 80**, **Sioux Center**, **IA**, **51250**, and Member any and all information in anyone's care, custody and control concerning the Applicant, specifically including any individuals executing this Authorization. The Applicant hereby releases you as the custodian of such records, both individually and collectively, from any and all liability for damages of whatever kind which may result because of compliance with this Authorization and Release of Information as well as any information CCC receives pursuant to this Authorization. The Applicant exits and cash flow information as well as any information CCC receives pursuant to this Authorization. The Applicance with this Authorization and Release. Please submit the completed application to Cooperative Credit Company, 128 Third Street NW, Sioux Center, IA, Fax: 712-722-1212 or contact your agronomist. It is expressly agreed that a photocopy of this Application shall be as valid as an original.

Applicant Name

Please complete the additional information below and submit your application as directed. If a Partnership Corporation, or LLC, include balance sheet with supporting schedules of the general partner, presidents, owner, or managing member. Include any interest held by a co-applicant including spouse, if applicable. A bank prepared statement may be substituted and mailed with the application in lieu of filling out the balance sheet information below.

Balance Sheet Date

Assets		Liabilities	
Cash, Checking, Savings	\$	CCC Loans	\$
Securities	<u>\$</u>	Operating Principal	<u>\$</u>
Accounts Receivables	<u>\$</u>	Accounts Payable	<u>\$</u>
Investment in Growing Crop	<u>\$</u>	Current Intermediate Debt	<u>\$</u>
Feed & Grain Inventory	<u>\$</u>	Current Long-Term Debt	<u>\$</u>
Market Livestock	<u>\$</u>	Leases	<u>\$</u>
Government Payments	<u>\$</u>	Misc. Current Liabilities	<u>\$</u>
Other Current Assets	<u>\$</u>	(Specify)	<u>\$</u>
(Specify)	<u>\$</u>		
Total Current Assets	<u>\$</u>	Total Current Liabilities	<u>\$</u>
Breeding Livestock	<u>\$</u>	Notes Payable – Specify	<u>\$</u>
Machinery & Equipment	<u>\$</u>	Machinery & Equipment Loans	<u>\$</u>
Vehicles	<u>\$</u>	Vehicle Loans	<u>\$</u>
Other Intermediated Assets	<u>\$</u>	Other Intermediate Debt	<u>\$</u>
(Specify)	<u>\$</u>	(Specify)	<u>\$</u>
Total Intermediated Assets	\$	Total Intermediate Liabilities	\$
Real Estate Value	\$	Mortgage Loans	<u>\$</u>
Buildings	\$	Other Long-Term Debt	<u>\$</u>
Other Long-Term Assets	<u>\$</u>	(Specify)	<u>\$</u>
(Specify)	\$		
Total Long-Term Assets	<u>\$</u>	Total Long-Term Liabilities	\$
Total Assets	<u>\$</u>	Total Liabilities	<u>\$</u>

For purpose of securing credit, the undersigned 1) certifies this statement is true and correct as of the date specified; 2) agrees to promptly notify Cooperative Credit Company any material change; and 3) acknowledges receipt of a copy of this statement.

Signature

Signature