

### **APPLICATION FOR DRIVING EMPLOYMENT**

### **PRE-HIRE CHECKLIST - EMPLOYMENT CONDITIONS**

|          | ank you for considering Alliance Ag & Grain, LLC as a potential employer. Before completing the Employment oplication, we wish to emphasize several points. Please check the box next to each statement and sign where indicated to acknowledge your understanding.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|          | Alliance Ag & Grain, LLC, is an equal employment opportunity employer, which selects the individual, it feels is the best match for the job based upon job-related qualifications, and regardless of race, color, religion, sex, gender, national origin, ancestry, age, disability, military status, genetic information or any other protected status.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|          | No applicant is officially considered an employee of this company until and unless he receives a letter, signed by a company official, confirming employment and the conditions of employment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|          | When conditions warrant, other management personnel may be given authorization to confirm employment for a brief, interim period.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|          | Employment with Alliance Ag & Grain, LLC is based on the "at will" doctrine, meaning that either the employee or the employer may terminate the employment relationship E any time and for any reason.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|          | We hope that we never have to lay off employees. However, we have clearly established that right and will lay off employees if management feels it is best for the company.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|          | Alliance Ag & Grain, LLC, has an anti-harassment policy that states that harassment of any kind will not be tolerated in the workplace, and that any and all complaints of harassment will be investigated fully, fairly and quickly, and will be decisively resolved.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|          | Only the CEO of Alliance Ag & Grain, LLC has the authority to enter into an agreement for employment, oral modification to either employment-at-will status or to an existing hiring agreement is not valid. Should you be hired, any offers made by your supervisors are valid only if they have been approved by the CEO, in writing.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|          | Dishonesty in the completion of the employment application will cause it to be considered invalid. Should the dishonesty become known in the future, regardless of how much time has passes, it may be considered grounds for immediate termination.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|          | Although an employee's rate of compensation may be expressed in a specific time frame (i.e., \$30,000 per year or \$2,000 per month), the term "year" and "month" are not to be construed as a guarantee of employment for that period of time.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|          | The first part of the Employment Application is for personal identification only. The questions listed are not intended to ask for information that could be labeled as discriminatory.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|          | In an attempt to be fair, the Employment Application is designed to only request information that will help in determining personal identification; job-related skills, qualifications, and abilities; work history and reliability; and education.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|          | Company management wants to make it clear that only written policies are binding, regardless of what, and by whom, and employee may be told, only written policies are binding.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|          | If you are offered and accept a position with the Alliance Ag & Grain, LLC, you will be required to complete a supplemental information application, which requests additional information such as your race, sex, etc. This information on the form will not be considered in any employment decisions; it is needed for various record-keeping requirements to state and federal agencies and insurance companies to ensure we are practicing or engaging in affirmative action.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|          | Alliance Ag & Grain, LLC reserves the right to have employees submit to a drug test by a designated laboratory, based on cause and/or the occurrence of a workplace accident or incident, should it feel that the test is warranted and necessary. Your continued participation form this point forward gives your consent for such a test.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|          | You will have access to the Employee Handbook at any reasonable time.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>D</b> | hooking off the how post to each of the paids represented the titles that I am a discuss the table a second of the paids represented the title and title and the title and |
| ву       | hecking off the box next to each of the prior paragraphs, I realize that I am acknowledging my understanding of their content and agree to abide by the spirit and intent of each paragraph.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|          | APPLICANT NAME: DATE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| A        | PLICANT SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

# Alliance AG & GRAIN, LLC APPLICATION FOR DRIVING EMPLOYMENT

| PERSONAL INFORMATION                                         |                                       |                               |                     |                                       |  |  |  |  |
|--------------------------------------------------------------|---------------------------------------|-------------------------------|---------------------|---------------------------------------|--|--|--|--|
| SSN                                                          | SN Date                               |                               |                     |                                       |  |  |  |  |
| Full Name:                                                   |                                       |                               |                     |                                       |  |  |  |  |
| Address:                                                     | Last                                  |                               | First               | M.I.                                  |  |  |  |  |
| Address.                                                     | Street Address                        |                               |                     | Apartment/Unit #                      |  |  |  |  |
|                                                              | City                                  |                               | State               | ZIP Code                              |  |  |  |  |
| Home Phone:                                                  |                                       | Cel                           | I Phone:            |                                       |  |  |  |  |
| Email                                                        |                                       |                               | Г                   | OOB                                   |  |  |  |  |
|                                                              | (US DOT requirement – 391.21 (b) (2)) |                               |                     |                                       |  |  |  |  |
|                                                              | ss is less than 3 years, lis          | t all residences fo           | r the past 3 years. | Attach a separate sheet if necessary. |  |  |  |  |
| Address:                                                     | Street Address                        |                               |                     | Apartment/Unit #                      |  |  |  |  |
|                                                              | City                                  |                               | State               | ZIP Code                              |  |  |  |  |
| Address:                                                     |                                       |                               |                     |                                       |  |  |  |  |
|                                                              | Street Address                        |                               |                     | Apartment/Unit #                      |  |  |  |  |
|                                                              | City                                  |                               | State               | ZIP Code                              |  |  |  |  |
|                                                              |                                       | POSITION INFO                 | RMATION             |                                       |  |  |  |  |
| Are you authorize                                            | d to work in the U.S.? Ye             | es 🗆 No 🗆                     | Referred By:        |                                       |  |  |  |  |
| State the name of                                            | any relatives, other than             | spouse, working f             | or this company:    |                                       |  |  |  |  |
| Position Applying                                            | For:                                  |                               | Date you can        | Start:                                |  |  |  |  |
| Desired Salary:                                              |                                       |                               |                     |                                       |  |  |  |  |
| Have you previous                                            | sly worked for this compa             | ny? Yes 🗌 No 🏻                | ☐ If so, From       | To                                    |  |  |  |  |
| Reason for leaving                                           | g:                                    | Forr                          | mer supervisor(s):  |                                       |  |  |  |  |
|                                                              |                                       | EDUCATI                       | ION                 |                                       |  |  |  |  |
| Name and                                                     | Location of School                    | Circle Last Year<br>Completed |                     | Subjects Studies & Degree(s)          |  |  |  |  |
| High School                                                  |                                       | •                             |                     |                                       |  |  |  |  |
|                                                              |                                       | 1 2 3 4                       | Yes □ No □          |                                       |  |  |  |  |
| College                                                      |                                       | 1 2 3 4                       | Yes □ No □          |                                       |  |  |  |  |
| Trada Businasa an Cam                                        | ann an danna Cabaal                   | 1207                          | 103 🗆 110 🗀         |                                       |  |  |  |  |
| Trade, Business, or Corr                                     | espondence School                     | 1 2 3 4                       | Yes □ No □          |                                       |  |  |  |  |
| Other Education or Training:                                 |                                       |                               |                     |                                       |  |  |  |  |
| Other special skills                                         | Other special skills:                 |                               |                     |                                       |  |  |  |  |
| Activities (Civic, athletic, etc.) in which you participate: |                                       |                               |                     |                                       |  |  |  |  |
|                                                              |                                       |                               |                     |                                       |  |  |  |  |

| EX                         | PERIENCE      | & QUALIFICA                       | TIONS (A     | TTACH SHEE      | TIF    | MORE SPACE  | NEE        | DED)                              |
|----------------------------|---------------|-----------------------------------|--------------|-----------------|--------|-------------|------------|-----------------------------------|
|                            |               | State                             | Lice         | nse No          |        | Туре        |            | Expiration Date                   |
| Driver License             |               |                                   |              |                 |        |             |            |                                   |
| Driver License             |               |                                   |              |                 |        |             |            |                                   |
| Driver License             |               |                                   |              |                 |        |             |            |                                   |
| Have you ever bee          | en denied a   | license, permit                   | , or privile | ge to operate a | a moto | or vehicle? | ⊥<br>∕es [ | ☐ No ☐                            |
| Has any license, p         | ermit, or pri | vilege ever bee                   | en suspend   | ded or revoked  |        |             | es □       | l No □                            |
|                            |               |                                   | DRIVING      | EXPERIENCE      | Ξ      |             |            |                                   |
| Class of Equipme           |               | of Equipment<br>Tank, Flat, etc.) | F            | rom             |        | То          | App        | proximate Number of Miles (Total) |
| Straight Truck             |               | , ,                               |              |                 |        |             |            |                                   |
| Tractor and Semi-T         | railer        |                                   |              |                 |        |             |            |                                   |
| Tractor and Two Tr         | ailer         |                                   |              |                 |        |             |            |                                   |
| Other                      |               |                                   |              |                 |        |             |            |                                   |
|                            | ACCII         | DENT RECOR                        | D FOR TH     | E PAST THRE     | F VE   | EARS OR MO  | ?F         |                                   |
| Dates                      | AGGII         |                                   | of Acciden   |                 |        | Fatalities  |            | Injuries                          |
| _ = 51100                  |               |                                   |              |                 |        |             |            | ,                                 |
|                            |               |                                   |              |                 |        |             |            |                                   |
|                            |               |                                   |              |                 |        |             |            |                                   |
|                            |               |                                   |              |                 |        |             |            |                                   |
| TRAFFIC                    | CONVICT       | ONS FOR PA                        | ST THREE     | YEARS (OTH      | HER 1  | THAN PARKIN | G VIC      | DLATIONS)                         |
| Locatio                    |               | Date                              |              |                 | harge  |             |            | Penalty                           |
|                            |               |                                   |              |                 |        |             |            |                                   |
|                            |               |                                   |              |                 |        |             |            |                                   |
|                            |               |                                   |              |                 |        |             |            |                                   |
|                            |               |                                   |              |                 |        |             |            |                                   |
| NOTE QUOMALLE              | EMPLOYM       | IENT RECORE                       | ) (ATTACI    | H SHEET IF M    | ORE    | SPACE IS NE | EDE        | <b>))</b>                         |
|                            |               |                                   |              |                 |        |             |            | THE PAST TEN YEARS                |
| Last Employer:             |               |                                   |              | Address         | :      |             |            |                                   |
| From:                      | To:           | P                                 | osition Held | d:              |        |             |            |                                   |
|                            | :             |                                   |              | Duties:         |        |             |            |                                   |
| Manager's<br>Name & Title: |               |                                   |              |                 |        |             |            |                                   |
| Starting Salary            |               |                                   |              |                 |        |             |            |                                   |

|                                                                                                                                                                                                                                          |                                                                                                          | EMPLOYMENT                                                                                                                                                                        | T RECORD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Second Last Employe                                                                                                                                                                                                                      | r:                                                                                                       |                                                                                                                                                                                   | Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                           |
| From:                                                                                                                                                                                                                                    | _To:                                                                                                     | Position Held:                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
| Manager's                                                                                                                                                                                                                                |                                                                                                          |                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | Final Salary:                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | EMPLOYMENT                                                                                                                                                                        | Γ RECORD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                           |
| Third Last Employer:                                                                                                                                                                                                                     |                                                                                                          |                                                                                                                                                                                   | _ Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                           |
| From:                                                                                                                                                                                                                                    | _To:                                                                                                     | Position Held:                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
| Manager's                                                                                                                                                                                                                                |                                                                                                          | _                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | Final Salary:                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | EMPLOYMENT                                                                                                                                                                        | Γ RECORD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                           |
| Fourth Last Employer:                                                                                                                                                                                                                    |                                                                                                          |                                                                                                                                                                                   | _ Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                           |
| From:                                                                                                                                                                                                                                    | _To:                                                                                                     | Position Held:                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
| Manager's                                                                                                                                                                                                                                |                                                                                                          |                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | Final Salary:                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | REFEREN                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
| Give b                                                                                                                                                                                                                                   | elow the                                                                                                 | e name of three persons NOT related to Address                                                                                                                                    | How Acquainted & # of Years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | t one year.<br>Phone Number                                                                                                                                                               |
|                                                                                                                                                                                                                                          |                                                                                                          |                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
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|                                                                                                                                                                                                                                          |                                                                                                          |                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                           |
|                                                                                                                                                                                                                                          |                                                                                                          | TO BE READ AND SIGN                                                                                                                                                               | NED BY APPLICANT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                           |
| history and authorize any information they may hav consideration of the prosp as a result of furnishing a I further agree that, if empersonnel recruiter, intervemployment for any spectourse of my employment of an interview creates a | presentate regard pective e nd receive of nd receive ployed, I viewer or iffied peri t shall no contract | ents are true and correct. I authorize the<br>/former employer, person, firm, corporat<br>ling me, and I understand that any misre<br>employer review of this application, I rele | e Company to make investigation of my tion, credit agency or government agency expresentation, or omission shall be cause exace the Company and all providers of inches of the Company has authority to enternal sor handbooks that may be distributed in that nothing contained in this benefit, and THAT I HAVE THE RIGHT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | cy to give the Company any se for dismissal. In information from any liability licies. I understand that no er into any agreement for buted to me during the sapplication or the granting |
| Date:                                                                                                                                                                                                                                    |                                                                                                          | _ Signature                                                                                                                                                                       | the later was a second of the later of the l | - Complete C. ( ) D. ( ) in                                                                                                                                                               |
| Note: A motor carrier may re                                                                                                                                                                                                             | quire an a                                                                                               | applicant to provide information in addition to                                                                                                                                   | the information required by the Federal Mot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | or Carrier Safety Regulations                                                                                                                                                             |

## ALLIANCE AG AND GRAIN, LLC FCRA DISCLOSURE AND AUTHORIZATION STATEMENT

All applicants for employment: Please read carefully before signing below.

As part of its employment application process, I understand that Alliance Ag and Grain LLC, HEREIN REFERRED TO AS "THE COMPANY" may obtain or have prepared a consumer/investigative consumer report concerning my prior employment, military record, education, credit worthiness, credit standing, credit capacity character, general reputation, personal characteristics, criminal background, driver's license history or mode of living.

I understand that upon written request to the company I will be informed whether an investigative consumer report was requested, and given full information as to the nature and scope of such investigation. I understand that an investigative consumer report is a report in which, information regarding my character, general reputation, personal characteristics, or mode of living, is obtained through personal interviews with neighbors, friends, or associates with whom I am acquainted.

By signing below, I authorize the company, to obtain a consumer/investigative report on me as part of its pre-employment background investigation process. If I am offered employment by the company I further authorize the company, to obtain additional consumer/investigative consumer reports on me for employment purposes at any time during my employment. I also acknowledge that the company has provided me with a summary of my rights under the Fair Credit Reporting Act.

| Signature of Applicant:                                                                                                  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Date:                                                                                                                    |  |  |  |  |
| Please provide the information below for a consumer/investigative report.                                                |  |  |  |  |
| Name of Applicant (please print):                                                                                        |  |  |  |  |
| Applicant's Date of Birth                                                                                                |  |  |  |  |
| Applicant's Social Security Number                                                                                       |  |  |  |  |
| Applicant's Home Address                                                                                                 |  |  |  |  |
| (*Please provide the information below if you are applying for a driving position.)  Applicant's Driver's License Number |  |  |  |  |
| Issuina State                                                                                                            |  |  |  |  |

Para información en español, visite <u>www.consumerfinance.gov/learnmore</u> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

#### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to <a href="www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> for an explanation of dispute procedures.

- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a>.
- You many limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a>.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

| TYPE OF BUSINESS:                                                                                               | CONTACT:                                                                               |
|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| 1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates | a. Consumer Financial Protection Bureau<br>1700 G Street, N.W.<br>Washington, DC 20552 |
| b. Such affiliates that are not banks, savings associations, or credit unions also should list,                 | b. Federal Trade Commission: Consumer<br>Response Center – FCRA                        |

| in addition to the CFPB:                                                                                                                                                                                                                                                                                      | Washington, DC 20580<br>(877) 382-4357                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. To the extent not included in item 1 above:                                                                                                                                                                                                                                                                |                                                                                                                                                                                   |
| a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks                                                                                                                                                                                                   | a. Office of the Comptroller of the Currency<br>Customer Assistance Group<br>1301 McKinney Street, Suite 3450<br>Houston, TX 77010-9050                                           |
| b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act | b. Federal Reserve Consumer Help Center<br>P.O. Box. 1200<br>Minneapolis, MN 55480                                                                                                |
| c. Nonmember Insured Banks, Insured State<br>Branches of Foreign Banks, and insured state<br>savings associations                                                                                                                                                                                             | c. FDIC Consumer Response Center<br>1100 Walnut Street, Box #11<br>Kansas City, MO 64106                                                                                          |
| d. Federal Credit Unions                                                                                                                                                                                                                                                                                      | d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314             |
| 3. Air carriers                                                                                                                                                                                                                                                                                               | Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590 |
| 4. Creditors Subject to the Surface<br>Transportation Board                                                                                                                                                                                                                                                   | Office of Proceedings, Surface Transportation<br>Board<br>Department of Transportation<br>395 E Street, S.W.<br>Washington, DC 20423                                              |
| 5. Creditors Subject to the Packers and Stockyards Act, 1921                                                                                                                                                                                                                                                  | Nearest Packers and Stockyards Administration area supervisor                                                                                                                     |
| 6. Small Business Investment Companies                                                                                                                                                                                                                                                                        | Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8 <sup>th</sup> Floor Washington, DC 20416                  |
| 7. Brokers and Dealers                                                                                                                                                                                                                                                                                        | Securities and Exchange Commission 100 F Street, N.E.                                                                                                                             |

|                                                | Washington, DC 20549                        |
|------------------------------------------------|---------------------------------------------|
| 8. Federal Land Banks, Federal Land Bank       | Farm Credit Administration                  |
| Associations, Federal Intermediate Credit      | 1501 Farm Credit Drive                      |
| Banks, and Production Credit Associations      | McLean, VA 22102-5090                       |
| 9. Retailers, Finance Companies, and All Other | FTC Regional Office for region in which the |
| Creditors Not Listed Above                     | creditor operates or Federal Trade          |
|                                                | Commission: Consumer Response Center –      |
|                                                | FCRA                                        |
|                                                | Washington, DC 20580                        |
|                                                | (877) 382-4357                              |