

APPLICATION FOR
MEMBERSHIP IN
FARMERS COOPERATIVE ELEVATOR ASSOCIATION
PO BOX 1087
LEVELLAND, TEXAS 79336

I, the undersigned, a producer of agricultural products, hereby apply for membership in Farmers Coop Elevator Assn. and agree to comply with and to be bound by the Articles of Incorporation and By-laws of the Cooperative and acknowledge receipt of a copy of the amendment to the By-laws of the cooperative concerning consent of members under the Internal Revenue Act of 1962, and of a written notification of the adoption of this amendment and of its significance. I enclose \$ 5.00 as payment for one share of Farmers Cooperative Elevator Association Common Stock to be issued to me.

Name of Applicant

Address of Applicant

City, State, and Zip of Applicant

Phone Number of Applicant

Applicant's Social Security Number

FOR OFFICE USE ONLY _____

EXECUTED THIS _____ DAY OF _____, 20__

YES _____

NO _____