

Attn: Grain Dept.

United Cooperative Electronic Funds Transfer Authorization

PLEASE COMPLETE & RETURN TO: United Cooperative

N7160 Raceway Rd. Beaver Dam, WI 53916 Ph: 920-887-1756 Fax: 920-887-1993

E-M	ail: <u>kiml@unit</u>	edcooperative.	com or damiang@unitedcoop	perative.com
CUSTOMER INFO	RMATION			
Customer Name			Patron No.	
Address			City/State/ Zip	
Phone Number			E-mail Address	
	Send Grain Settlement E Email	By YES	NO	
BANK INFORMAT	 <u>ION</u>			
Bank Name			Phone No.	
Address			City/State/Zip	
ABA Routing No.			Account No.	
Type of Account: (circle one)	Checking	Savings		
	ELEC	TRONIC FUND	OS TRANSFER AUTHORIZA	TION
adjustments for any of direct the Bank above scheduled for grain so until I request differe or other service fees to electronic processi	credit entries in the to honor the control of the tettlements procently by providing tharged by my thang availability of the order for it to	error) to my (o credit entries init essed through Urg at least a 30 d financial institution the date of a be processed a	ur) account at the financial instited by United Cooperative. Somited Cooperative. This authorited Witten Notice. United Cooperon in the event that my designate a scheduled transfer. I (we) u	es (and if necessary, debit entries and citution ("Bank") listed above. I (we) such electronic funds transfers will be try is to remain in full force and effect trative is not responsible for overdraft ted account has insufficient funds due nderstand that a voided check must k hereto. I (we) acknowledge receipt
Signature:				Date:
Printed Name:				
		PLEASE ATT	ACH VOIDED CHECK HERE	:

N7160 Raceway Road ★ Be