

TREMONT CO-OPERATIVE GRAIN COMPANY

P.O. BOX 83

TREMONT, ILLINOIS 61568-0083

**** LIMITED POWER OF ATTORNEY ****

KNOW ALL PERSONS BY THESE PRESENTS, that the undersigned does hereby make, constitute, appoint

_____ of _____

_____ County, State of _____, the true and lawful attorney for and in the name, place, and stead of the undersigned for the purpose of signing **PRICE LATER contracts**.

This POWER OF ATTORNEY shall remain in full force and effect until written notice of its revocation has been duly served the appointee.

The foregoing POWER OF ATTORNEY set forth above is signed and dated at _____, this _____ day of _____ 20____.

(Customer signature)

(print customer name)

COUNTY OF _____)

)

STATE OF _____)

I, the undersigned, in and for, and residing in the said County and State aforesaid, DO HEREBY CERTIFY, that _____ personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered the said instrument as his free and voluntary act, for the uses and purposes therein set forth.

Witness my hand and official seal, this _____ day of _____ 20____.

Notary Public (or witness)

My commission expires:

(SEAL)
