



INDIVIDUAL CONSENT & SUBSTITUTE FEDERAL FORM W-9

I hereby consent to include in my gross income, as now or hereafter provided in the federal income tax laws, the stated dollar amount of each written notice of allocation, which I receive from:

THE WHEATON-DUMONT COOP ELEVATOR

with respect to my patronage occurring during the current and all subsequent taxable years of this cooperative. This individual consent shall be revocable by me, in writing, at any time.

First name (Please print)	MI	Last	Account Numbers
Mailing Address			Social Security Number
City	State	Zip	Federal I.D. Number
Date of Birth			Telephone Number and/or Cellular Number

Certification: under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because; (a) I am exempt from backup withholding or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to back up withholding as a result of a failure to report all interest of dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions: You must cross out Item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Signature of U.S. person	Date
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