



GRAIN DIRECT DEPOSIT AUTHORIZATION

New **Change**

Customer Number: _____

Customer Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

****Please include email for settlements to be automatically sent****

I hereby authorize Legacy Farmers Cooperative, to initiate any credit entries and also, if necessary, debit entries and adjustments for any entries in error to my bank account indicated below and the financial institution named below for Grain sold to Legacy Farmers Cooperative. (Please note that any debit would only occur after communication and approval by the customer first.)

Financial Institution Name Routing/ABA # Account Number

Checking Savings (Please mark one only)

***Please Note:** Grain must be sold and settlement instructions must be given by 3:30 PM for credit next day to your bank account. Funds are often available in your bank account the next business day; specific timing may vary based on your financial institution. Legacy Farmers Cooperative does not guarantee next day availability of funds.

The authority is to remain in full force until Legacy Farmers Cooperative has received written notification from me of its termination in such timely manner to afford Legacy Farmers Cooperative and the Financial Institution a reasonable opportunity to act on it

Signature: _____ Date: _____

Please attach to this form a voided check (not a deposit slip). This must be in place in order for you to receive proper credit to your account.