



# Illinois State Treasurer

## COMMUNITY DEVELOPMENT LINKED DEPOSIT PROGRAM

### INVEST IN ILLINOIS - AG INVEST AGRICULTURE ACKNOWLEDGMENT FORM

This Ag Invest: Agriculture Acknowledgment Form (“Acknowledgment Form”) is to be completed by the following individuals: (1) a lender representative (“Lender Representative”) of the financial institution (“Financial Institution”) that has been approved for a deposit under the Invest in Illinois: Ag Invest - Agriculture Operating Line of Credit Loan Program (“Program”); and (2) the borrower seeking a loan from Financial Institution under the Program (“Borrower”). This Ag Invest Community Development Linked Deposit Program is facilitated by the Office of Illinois State Treasurer (“Treasurer”). The Program is an agriculture-focused impact investment program providing loan opportunities for Illinois farmers and farm businesses. The impact investment time deposits shall be used to provide loans to Illinois farmers and farm businesses in Illinois. This form acknowledges the loan the Borrower received by the Financial Institution under the Program.

## SECTION 1: BORROWER INFORMATION

Borrower’s Full Name: \_\_\_\_\_ Farm Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ County: \_\_\_\_\_ Last 4 SSN: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Female Male

Phone: \_\_\_\_\_ In what year did the Borrower begin to operate in any part of this farm business? \_\_\_\_\_

## SECTION 2: LOAN INFORMATION

This Section to be completed by Financial Institution and disclosed to Borrower. Borrower will attest that they received this information in Section 4.

Borrower Loan Amount: \_\_\_\_\_ Deposit Date (Date of ACH/WT): \_\_\_\_\_ Maturity Date: \_\_\_\_\_

Time Deposit Rate: \_\_\_\_\_ Borrower Loan Rate: \_\_\_\_\_ \*Conventional Rate: \_\_\_\_\_

*\*Conventional loan rate is the interest rate at which the loan would be priced without the use of a linked deposit program.*

## SECTION 3: FARM INFORMATION

1. Provide description of proposed use of funds. Check all that apply.

- |  |  |   |
|--|--|---|
| Cash Rent                                    | Irrigation Systems                         | Purchase of Livestock/Breeding Stock Qualified Agribusiness |
| Construction/Renovation                      | Labor                                      | Refinance   |
| Crop Insurance                               | Land Acquisition (up to \$600,000)         | Salaries  |
| Farm Equipment                               | Medical /Veterinarian Expenses             | Seed, Feed, & Fertilizer                                    |
| Fertilizer                                   | Milling Production                         | Transitioning   |
| Grain Processing                             | Plant                                      | Processing Production                                       |
| Hoop Houses                                  | Processing Production                      | Qualified Agribusiness                                      |
| Implement Soil & Water Conservation Practice | Production-Related Energy & Labor Expenses | Other: _____  |

**2a. Borrower's age range:**

Under age 25	Age 45 to 54
Age 25 to 34	Age 55 to 64
Age 35 to 44	Age 65 and older

**3. Provide what type of farm production the funds will be used for. Check all that apply.**

Farm Business	Conventional Farm	Sustainable Farm
Transitioning Farm to Organic	Value Added Farm	

**4. Check all that best describe your farm business.**

Ag trucking	Field crops (beans, corn, wheat)	Hogs/pigs	Sheep/goats
Bees	Fish	Horseradish	Sorghum
Buckwheat	Fruits	Nuts/berries	Store front
Cattle/calves	Grapes/vineyard	Oats	Tile business
Christmas trees	Hay/forage crops	Ostriches	Vegetables
Cover crop	Hemp	Poultry	Other: _____

**5. Provide farm business gross income.**

< \$9,999	\$100,000 to \$249,999	\$1,000,000 to \$1,999,999	> \$5,000,000
\$10,000 to \$49,999	\$250,000 to \$499,999	\$2,000,000 to \$2,999,999	
\$50,000 to \$99,999	\$500,000 to \$999,999	\$3,000,000 to \$4,999,999	

*Please return this completed application to: [Banking-TimeDeposit@illinoistreasurer.gov](mailto:Banking-TimeDeposit@illinoistreasurer.gov)*

Illinois State Treasurer Michael W. Frerichs Invest in Illinois: Ag Invest  
 1 East Old State Capitol Plaza  
 Springfield, Illinois 62701  
 Phone: (217) 558-6217 \* Fax: (217) 557-6439  
 Website: [www.illinoistreasurer.gov](http://www.illinoistreasurer.gov)

## SECTION 4: BORROWER CERTIFICATIONS AND ACKNOWLEDGMENTS

By signing below, the Borrower agrees and certifies as follows:

1. The Borrower has contracted with and received a 1-year term or a 2-year term loan from the Financial Institution under this Program with an interest rate not to exceed the Treasurer's Deposit Rate by more than 2.75%.
2. Borrower acknowledges the information in "Section 2: Loan Information."
3. Borrower has the authorization to utilize these funds as a line of credit.
4. Borrowers are allowed one loan per Borrower not to exceed \$600,000 under the Program through participating Financial Institution for a 1-year term or a 2-year term loan. Borrower is allowed only one operating line of credit loan at any given time.
5. The loan funds provided must be used for the purposes set forth in this Acknowledgment, namely that the funds are to be used for costs related to one or more of the following: (1) conventional farming; (2) transitioning farm; (3) sustainable farming; (4) value added farming; or (5) farm business.
6. Costs covered by the Program include, but are not limited to the following: seed, feed, fertilizer, plants, cash rent, crop insurance, purchase of livestock or breeding stock, production related energy and labor expenses, veterinary fees, new and used farm equipment, or costs related to sustainable/value added production such as processing, milling, transitioning, greenhouses, irrigation, and hoop house.
7. The Treasurer may withdraw the deposit and the Financial Institution may accelerate repayment of the loan and both entities seeking any other available relief if the Borrower fails to satisfy all the requirements of the Program or if the Borrower makes a false or incomplete statement.
8. All information and the documentation regarding the Program are public records under the Illinois Freedom of Information Act, 5 ILCS 140. The Treasurer may release any information provided to it by the Borrower and may also release any information regarding the approval or rejection of the application.
9. Borrower acknowledges that the Treasurer may perform site visits at the farm for compliance purposes and may request additional information about the project or loan. Borrower agrees as a condition of the loan they must cooperate with the Treasurer and the Financial Institution.
10. The foregoing statements and the information provided in this Acknowledgment Form are true and complete. Borrower shall promptly notify the Financial Institution and the Treasurer of any changes in the information provided in this Acknowledgment Form. I understand that a false or incomplete statement may result in the Treasurer withdrawing the deposit and the Financial Institution accelerating the repayment of the loan and both entities seeking any other available relief. I also understand that an individual who provides a false statement may be subject to criminal prosecution or civil liabilities under the laws of the State of Illinois, including the Illinois Criminal Code (720 ILCS 5 et seq.).

Borrower's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION 5: FINANCIAL INSTITUTION CERTIFICATION AND ACKNOWLEDGMENTS

The Financial Institution certifies that the loan was provided to the Borrower in accordance with the Program and this Acknowledgment Form. The Financial Institution further agrees to comply with all applicable laws and regulations, including all legal requirements related to the Deposit of State Moneys Act (15 ILCS 520) and all Program requirements. The Financial Institution shall submit this Acknowledgment Form to the Treasurer within 30 calendar days from the date the Treasurer issues the deposit to the Financial Institution. The Financial Institution certifies that all statements and representations made herein and in the related documents are true and correct and were disclosed to the Borrower. Faxed and emailed copies are acceptable.

Lender Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Lender Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SUBSCRIBED and SWORN to before me (Notary signature date should match that of the Financial Institution Representative's signature date)

(Notary Public Signature) \_\_\_\_\_ This \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_  
year

*(seal)*

*Please return this completed application to: [Banking-TimeDeposit@illinoistreasurer.gov](mailto:Banking-TimeDeposit@illinoistreasurer.gov)*

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