



Invest in Illinois
AG INVEST: ANNUAL AGRICULTURE
Acknowledgement Form

In furtherance of the purposes of the Ag Invest: Annual Agriculture Linked Deposit Loan Program ("Program"), the Office of the State Treasurer agrees with the Financial Institution named below to enter into the financial transaction described hereunder:

SECTION 1: BORROWER INFORMATION

Farm Business Name (Applies to attachment 1B): [text box]

Borrower's Full Name: [text box] Birthdate: [text box] Last 4 SSN: [text box] Female Male

Address: [text box] County: [text box]

City: [text box] State: [text box] Zip: [text box]

Phone: [text box] Email: [text box] Email appreciated, but not required

Loan rate to the Borrower cannot exceed the Deposit Rate by more than 3.75%.

Borrower Loan Amount: [text box]

Deposit Date (Date of ACH/WT): [text box]

1 Year Ag Deposit Rate: [text box]

Maturity Date: [text box]

Borrower Loan Rate: [text box]

*Conventional Rate: [text box]

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

SECTION 2: PROJECT/LOAN INFORMATION

A. PROJECT INFORMATION AND OPERATIONS

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

- Checkboxes for various project categories: Cash Rent, Construction/renovation, Crop insurance, Farm equipment, Fertilizer, Grain processing, Hoop houses, Implement soil and water conservation practice, Irrigation systems, Labor, Land acquisition (up to \$400,000), Medical/Veterinarian expenses, Milling production, Plants, Processing production, Production-related energy and labor expenses, Purchase of livestock/breeding stock, Qualified agribusinesses, Refinance, Salaries, Seed, feed, and fertilizer, Transitioning cost and acquisition cost up to \$400,000, Transportation cost, Veterinarian cost, Other: [text box]

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

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

3. Provide all that best describe the borrower's farm business.

- | | | | |
|--|---|---------------------------------------|--|
| <input type="checkbox"/> Ag trucking | <input type="checkbox"/> Field crops (beans, corn, wheat) | <input type="checkbox"/> Hogs/pigs | <input type="checkbox"/> Sheep/goats |
| <input type="checkbox"/> Bees | <input type="checkbox"/> Fish | <input type="checkbox"/> Horseradish | <input type="checkbox"/> Sorghum |
| <input type="checkbox"/> Buckwheat | <input type="checkbox"/> Fruits | <input type="checkbox"/> Nuts/berries | <input type="checkbox"/> Store front |
| <input type="checkbox"/> Cattle/calves | <input type="checkbox"/> Grapes/vineyard | <input type="checkbox"/> Oats | <input type="checkbox"/> Title business |
| <input type="checkbox"/> Christmas trees | <input type="checkbox"/> Hay/forage crops | <input type="checkbox"/> Ostriches | <input type="checkbox"/> Vegetables |
| <input type="checkbox"/> Cover crop | <input type="checkbox"/> Hemp | <input type="checkbox"/> Poultry | <input type="checkbox"/> Other: <input type="text"/> |

4. Borrower's age.

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

5. Borrower's ethnicity.

- White
 Hispanic or Latino
 Black or African American
 American Indian or Native American
 Asian American
 Other:

6. Provide Farm Business Gross Income.

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

7. Please answer the following questions.

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

Please indicate how many employees work on the farm:

Description	# of Employees	Female Percentage	Male Percentage
Employees who worked less than 150 days/year			
Employees who worked more than 150 days/year			
Employees unpaid (including family)			

SECTION 3: SIGNATURE AND NOTARY

The Borrower acknowledges receipt of the loan in the amount, at the 1-year Ag interest rate and for the term identified above. The Borrower certifies that the loan shall be used for eligible program purposes in accordance with the related Lender Deposit Application Form. The Borrower has the ability to utilize these funds as a line of credit. The Borrower certifies that he/she has no approval authority over lending transactions at the financial institution. In addition, Borrower's are allowed one loan per single borrower not to exceed \$400,000 or \$800,000 for farm operations under the Program through your participating Financial Institutions during the current calendar year.

Borrower's Signature _____ Date ____/____/____

The Financial Institution certifies that the funds provided under this agreement shall be used for the eligible Program purposes described in the related Lender Deposit Application Form. The Financial Institution further agrees to comply with all legal requirements related to the Deposit of State Moneys Act (15 ILCS 520) and with all policies and procedures implementing the Annual Agriculture Linked Deposit Loan Program. The Financial Institution shall submit this Acknowledgement Form to the Office of the State Treasurer within **30 calendar days** from the deposit date as evidence that the funds are being used for an eligible Program purpose. The Financial Institution certifies that all statements and representations made herein and in the related documents are true and correct to the best of its knowledge and belief. Faxed copies are acceptable.

Representative: Title:

Financial Institution:

Address: County:

City: State: Zip:

Phone: Fax: Email:

Representative Signature _____ Date ____/____/____

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

(Notary Public Signature) _____

This ____ day of _____, _____

(seal)

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Please return this Acknowledgement Form to:

Illinois State Treasurer Michael W. Frerichs
Invest In Illinois: Ag Invest * 400 West Monroe, Suite 305
Springfield, Illinois 62704
Phone: (217) 782-0764 * Fax: (217) 558-3793
Email: Banking-TimeDeposit@illinoistreasurer.gov
Website: www.illinoistreasurer.gov