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DELIVERING QUALITY SOLUTIONS
www.frontieraginc.com

Table with 4 columns and 3 rows. Header: (For Cooperative's Use Only). Rows contain CERT#, INV#, and R# fields.

FRONTIER AG, INC. APPLICATION FOR MEMBERSHIP/PARTICIPATION AND WRITTEN CONSENT

The undersigned (1) _____ does hereby apply for ___ Common Stock Membership, or ___ Non-voting Membership in FRONTIER AG, INC. of Oakley, Kansas, and agrees to conform to the Bylaws of this association.

The undersigned is ___/ is not ___ a producer of agricultural products. (Common stock membership requires the applicant to be a producer of agricultural products.)

The undersigned, a patron of FRONTIER AG, INC. of Oakley, Kansas, does hereby consent to include in his gross taxable income, the stated dollar amount of any distribution (s) with respect to such patron's patronage which are made in written notices of allocation and which are received by patron from the cooperative in the taxable year in which such written notices of allocation are received by the undersigned in the manner provided in 26 U.S.C. 1385 (a).

The undersigned hereby acknowledges receiving a copy of the Bylaws of FRONTIER AG, INC. and does hereby consent to adhere to the provisions and limitations as set forth in the Bylaws and Credit Policy, and any amendments thereto.

Under the penalties of perjury, I certify that the information provided on this form is true, correct and complete.

Dated this ___ day of ___, 20___. Date of Birth: (2) ___/___/___

Social Security Number or TIN: _____

I will purchase one (1) Share of Stock at \$100.00 before this application can be considered For Board approval.

Please make check payable to: FRONTIER AG INC.

Applicant's Name (Please Print) _____ Applicant's Address-PO/Street Address, City, State, Zip Code _____

(3) _____ Signature (3) _____ Signature (3) _____ Signature

According to the new Revenue laws, we will need to have a Social Security of Identification Number for all members or member account. If membership is being submitted under joint husband and wife, then we will need the husband's number. If partnership or corporation account, we will need the partnership or firm's number.

- (1.) Please designate the applicant as one of the following: Individual, Firm, Partnership, Corporation, Association, or Trust.
(2.) Birth date of the applicant or Trustor.
(3.) If Partnership, all partners sign. If a Corporation, President and Secretary sign.

The foregoing consent is revocable by the member in a writing received by the association, PROVIDED HOWEVER, that such revocation is effective with respect to patronage occurring after the close of the association's fiscal year during which said written revocation is received. THE PATRONS/MEMBER'S CONSENT IS REQUIRED FOR THE COOPERATIVE TO RECEIVE AN INCOME TAX DEDUCTION FOR ITS PATRONAGE ALLOCATIONS, pursuant to Subchapter T of the Internal Revenue Code of 1954, Sections 1381 through 1388.

(For Cooperative's Use) *

In accordance with the bylaws of this cooperative association, this application has been considered by the Board of Directors and:

_____ Approved _____ Disapproved

Chairman: _____

Verified by Frontier Ag, Inc. Employee: _____

_____ Grain/Beef Producer

Secretary: _____

_____ Comments