



## 2024-CROP MEMBERSHIP QUALIFICATION VERIFICATION PURSUANT TO MINN-DAK FARMERS COOPERATIVE BY-LAWS

The undersigned shareholder of Minn-Dak Farmers Cooperative (“the Cooperative”) does hereby verify that he/she/it is a producer who a) resides in the territory served by the Cooperative; b) patronizes the Cooperative in accordance with uniform terms and conditions prescribed by the Cooperative; and c) has been approved by the Board of the Cooperative.

Further, that he/she/it qualifies as a “shareholder-producer” as: **(Complete applicable numbers and initial; at a minimum 1, 2 OR 4 MUST apply).**

- \_\_\_\_\_ 1) A person (natural or corporate) actually engaged in the production of sugarbeets;
- The beets are raised under the shareholder name.
  - The beets are raised under a partnership of which I am a general partner.
  - The beets are raised under a corporation **(if this box is checked, items 2, 3 or 4 MUST apply).**

- \_\_\_\_\_ 2) A person (natural or corporate) actually engaged in the production of other agricultural products (commodities); (certification of identity required)
- The FSA office lists the shareholder as the farmer.
  - The FSA office lists a partnership as the farmer, of which I am a general partner.
  - The FSA office lists a corporation as the farmer.

\_\_\_\_\_ 3) A person (natural or corporate) who is a tenant of land used for the production of sugarbeets or other agricultural products (commodities). **(If this item applies, then item 4 MUST be completed).**

\_\_\_\_\_ 4) A person (natural or corporate) who is a lessor of land used for the production of sugarbeets or other agricultural products (commodities) who receives as rent therefore part of any such products of such land; (certification of identity required): \_\_\_\_\_ (shareholder) is crop sharing with \_\_\_\_\_ (tenant) \_\_\_\_\_ acres on the following land description (attach if necessary):

\_\_\_\_\_ 5) A cooperative association (corporate or otherwise) of qualified shareholder-producers of the Cooperative.

I/We hereby agree that I/we will notify the Cooperative within 10 days of any change in my/our circumstances, which alter my/our qualifications as a shareholder-producer under items 1 through 5 above.

Under penalties of perjury, I/we declare that I/we have reviewed the statements contained herein, and to the best of my/our knowledge and belief, they are true, correct, and complete.

Further, I/we hereby agree to indemnify the Cooperative for any losses suffered by the Cooperative if the above representations are found to be untrue.

DATE	PRINTED NAME	SIGNATURE
	Shareholder (long form)	