



Archer Daniels Midland Company
 Funds Transfer Authorization Agreement (**Grain Payments – US and CAD**)

Vendor Name: _____

1099 Info (US only) Social Security -or- Federal Tax Id #: _____

Contact Name: _____

Contact Phone # _____ Contact e-mail: _____

Payment Confirmation Choice:

- _____ Option A: CTX with electronic remittance detail – US Funds.
- _____ Option B: X12 with electronic remittance detail – Canadian Funds.

Name of Financial Institution: _____

Address: _____

Bank Routing #: _____

Account #: _____

PLEASE CHECK ONE: FREIGHT _____ GRAIN _____ BOTH _____

By signing and completing the enclosed form, you authorize Archer Daniels Midland Company, its subsidiaries and affiliates (collectively “ADM”) to make future payments relating to grain settlements by ACH transfer. ADM may from time to time, at its discretion, suspend payments by ACH transfer, and then resume payments by ACH transfer pursuant to this authorization using the banking information supplied herein.

This letter shall also confirm that, with respect to all grain sold by you to ADM; you have good title to such grain, free and clear of all liens and encumbrances whatsoever.

Neither party shall be liable to the other for any failures or errors beyond its reasonable control including, without limitation, mechanical, electronic or communications failure of errors. Neither party shall be liable to the other for any special, incidental, exemplary or consequential damages arising from or as a result of any delay, omission, error or failure in the electronic transfer of funds.

This authority shall remain in effect until termination upon (30) days written notice by either Vendor or ADM. Notice of termination shall in no way affect debit/credit entries initiated prior to actual receipt of notice.

All credit and other terms and conditions between Vendor and ADM remain in effect.

FOR AN UPDATE TO AN EXISTING ACCOUNT, YOU WILL RECEIVE A TELEPHONE CALL FROM A MEMBER OF THE ACCOUNTS PAYABLE TEAM IN DECATUR, ILLINOIS (AREA CODE 217). PLEASE NOTE: PAYMENTS CANNOT BE MADE TO YOUR ACCOUNT UNTIL THIS PHONE VERIFICATION IS COMPLETED.

Authorized Signature: _____

Title: _____

YOU MUST ATTACH A COPY OF A VOIDED CHECK IN ORDER FOR YOUR ACH REQUEST TO BE PROCESSED