



ACH SETUP AND/OR ADDRESS CHANGE FORM - Investor

I hereby authorize United Wisconsin Grain Producers LLC (THE COMPANY) to initiate entries to my checking/savings accounts at the financial institution listed below (THE FINANCIAL INSTITUTION), and, if necessary, initiate adjustments for any transactions credited in error. This authority will remain in effect until THE COMPANY is notified by me in writing to cancel it in such time as to afford THE COMPANY and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

INVESTOR INFORMATION (separate forms are needed for each investment):

Investor/Entity Name - PLEASE PRINT

Investor Address/New Address - PLEASE PRINT

Phone

E-mail Address

Signature*

Date

Signature*

Date

* Joint owners must both sign. When signing as attorney, executor, administrator, trustee or guardian, please note that fact.

☐ No Change to Financial Information

FINANCIAL INFORMATION (Must submit a VOIDED check):

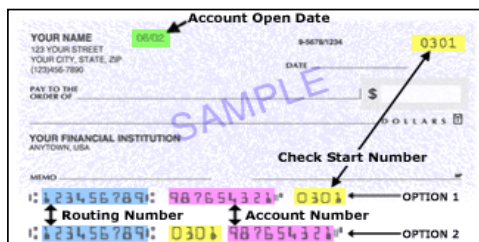
(Name of Financial Institution)

Account Name - PLEASE PRINT

Checking/Savings (Circle Type)

Account Number
(see image)

Financial Institution Routing Number:
(see image)



Submit this form along with a VOIDED check via email (mail@uwgp.com), fax (920-348-5009) or mail (P.O. Box 247, Friesland, WI, 53935)