



Grain Direct Deposit Agreement Form

Authorization Agreement

I hereby authorize Mercer Landmark to initiate automatic deposits to my account at the financial institution named below. I also authorize Mercer Landmark to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold Mercer Landmark responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Mercer Landmark receives a written notice of cancellation from me or my financial institution.

Account Information

Name of Financial Institution: _____

Address of Financial Institution: _____

Routing Number: _____

Account Number: _____

Checking

Savings

Please include a copy of a voided check or deposit slip to help ensure that accurate bank account information is recorded.

Signature

Authorized Signature (Primary): _____ Date: _____

Patron's Name: _____

Federal ID Number: _____

If you would like any of the following items emailed, please indicate.

Grain Settlements

A/R Invoices

A/R Statements

E-mail Address: _____