

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN POST-PRODUCTION: ADVANCE FOR HARVESTED CROPS, FORAGE, HAY & GRASS SEEDS IN STORAGE

You may use this form to apply for an Advance for harvested crops, forage, hay and grass seeds in storage. You may also use this form after you have harvested crops, forage, hay and grass seeds on which you have obtained an Advance for Agricultural Products in Production. If you have obtained an Advance on Agricultural Products in Production, this Advance will be repayable by January 31, 2021 if we do not receive this form by December 31, 2020. Advance Rates are subject to change at any time during the Program Year. Call 1-844-333-3377 to obtain the most recent Advance Rates.

List only those commodities for which you are applying for an advance.

Instructions

- ✓ A Post-Production Report must be completed by December 31, 2020 for any Producer who has an outstanding In Production Advance under the APP.
- ✓ This must be completed whether or not the Producer is requesting a Post-Production Advance. An inspection of the Producer's Agricultural Product(s) shall be performed by the Administrator to ensure that there is sufficient Agricultural Product(s) in storage to secure any outstanding Advance amounts.

Multi-Peril Insurance

- ✓ The Producer must confirm that they have multi-peril insurance on their farming operation which includes coverage for the entirety of the Agricultural Product(s) they have in storage.
- ✓ Where the Agricultural Product(s) is stored off-farm at commercial storage facility, the Producer must confirm that the commercial storage company has such insurance.
- ✓ This insurance coverage must be in effect until the Advance taken under the Repayment Agreement is fully repaid.

General

- ✓ Complete Section A using the Advances Rates in effect at the time of the Post-Production Report in order to confirm that the value of the Agricultural Product(s) in storage is sufficient to cover the value of the outstanding Advance.
- ✓ The Producer must not have more than \$1 million in outstanding Advances, including as a result of the overlap between Program Years. Advances amounts issued above the first \$100,000 issued in a Program Year shall be interest-bearing.

A. Stored Grain Advance

Commodity	Harvested Acres <i>(indicate year crop harvested in bracket)</i>	Stored Quantity (MT or lb.) Against which Advance is Requested	WeCAP Advance Rate ¹ (\$)	Amount (\$)
	()		X	=
	()		X	=
	()		X	=
	()		X	=
	()		X	=
	()		X	=
	()		X	=
	()		X	=
	()		X	=
	()		X	=

Maximum Eligible Advance (\$) A \$

Total amount of Production Advance Issued, if applicable (1st and 2nd Installments) B \$

¹ Advance Rate is the rate at the time of Post-Production. Rates are subject to change at any time during the Program Year. Visit www.feederassoc.com or call 1.844.333.3377 to obtain the most recent rates.

WORKSHEET FOR PRODUCT IN POST-PRODUCTION - Continued

B. Request for Post Production Installment

If "A" is less than "B" and the difference is equal to or higher than \$10,000 or 10% of B (whichever is greater), the Producer is in an **overpayment** and must pay the overpayment in accordance with the Repayment Agreement.

If "A" is greater than "B" then the Producer may request an additional Advance up to the Maximum Eligible Advance by checking the appropriate box below.

<input type="checkbox"/>	I do not wish to receive an additional Advance			
<input type="checkbox"/>	<p>I wish to receive an (additional) Advance of \$ _____.</p> <p>I have completed, signed and attached a new Priority Agreement for the amount indicated above.</p> <p>This request is based on the Agricultural Product I have in inventory and I will keep the Agricultural Product adequately stored to ensure it remains in marketable condition until disposed of in accordance with the Terms and Conditions of the Repayment Agreement I have entered into under the APP.</p> <p>I declare that I have multi-peril insurance on my farming operation which provides coverage for the entirety of the Agricultural Product(s) I have in storage, or, where the Agricultural Product is stored off-farm at commercial storage company has such insurance, and that this insurance coverage will be in effect until the Advance taken under this Repayment Agreement is fully repaid.</p> <p>I declare having completed and signed an Advance Payments Program Application and Repayment Agreement.</p> <p>I declare that the above information is true and accurate at the time of completion and agree to repay the Administrator any difference, where applicable, as stated above.</p> <p>I agree to comply with all of the terms and conditions included in this Application form and Repayment Agreement.</p> <table border="1" style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 33%; padding: 2px;">Signature of Producer</td> <td style="width: 33%; padding: 2px;">Name of Producer (Please print)</td> <td style="width: 33%; padding: 2px;">Date</td> </tr> </table>	Signature of Producer	Name of Producer (Please print)	Date
Signature of Producer	Name of Producer (Please print)	Date		

Indicate your intentions for Post-Harvest/Fall Advance by selecting one of the following:

A. Applying for the first time under the 2020/21 program:

- 1. Issue maximum eligible funds
- 2. Issue funds only in the amount of \$ _____

B. Transfer Spring to Post-Harvest/Fall:

- 1. No additional funds requested (no funds will be issued)
- 2. Issue maximum eligible funds
- 3. Issue additional funds only in the amount of \$ _____

List the names of buyers for any commodities which have been sold but for which payment has not been received as well as the dates and amounts on which payment is due.

Name of Buyer	Amount

Legal description (section-township-range) of land where the Agricultural product(s) is/are Stored:

List the names of all Agricultural Input Suppliers who have provided Inputs for the listed commodities and indicate the amount owing. Priority agreements must be signed and provided with this Application by each of these Input Suppliers.

Contract #and Name of Agricultural Input Supplier	Amount

WORKSHEET FOR PRODUCT IN POST-PRODUCTION - Continued

C. Other Advances

The outstanding balance for other Advances Issued to the Producer or applied for by the Producer under the APP:

- 2019 APP Advances payable to WeCAP (all categories) \$ _____
 - 2020 APP outstanding Advances owing to WeCAP (all categories) \$ _____
 - 2019 APP outstanding Advances owing to other Administrators (all categories) \$ _____
 - 2020/2021 APP Advances outstanding to Other Administrators and applied for (whether issued or not) to Other Administrators \$ _____
- Total: \$ _____

D. Statement of Inventory

FORAGE / HAY / CROP INVENTORY FOR SALE					
Description	Acres (Seeded or Harvested)	Quantity (on Hand)	Units (lbs., Bus, MT, other)	Price per Unit	Total Value (\$)
Legal land Locations					
Liens, Security Interests, etc...					

E. Attached Documents

The following documents are attached and have been completed and (if required) signed by an authorized signatory of the entity referred to therein. **[Check applicable.]**

- Priority Agreement for Agricultural Input Supplier(s)
- Post-Production Report

F. Agreement and Declaration

I understand and agree that this Worksheet will be part of my Advance Payments Program Application and Repayment Agreement for 2020/2021 with the Administrator.

I hereby declare that the information provided above is complete and correct and that I am not in Default the APP with the Administrator or any Other Administrators.

Signature of Producer	Name of Producer (Please print)	Date	APP ID#
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WeCAP Use ONLY	Advance Approved by Administrator	\$	Acct. Rep.	Initial	Date
	Less Spring and/or Actual Seeded Advance Issued	\$	GM	Initial	Date
	Final Installment	\$			
	APP ID #				
I declare having taken all necessary steps, in accordance with the AMPA, its Regulations, the Guarantee, and APP Administration Guidelines, to ensure, to the best of my abilities, that the current application by the Producer is accurate and complete before granting the abovementioned Advance.					
Administrator Signature					