



208 MEDICAL CENTER COURT • PRATTVILLE, ALABAMA • 36066

PHONE: 334-365-3369 • FAX: 334-365-9261

I AUTHORIZE DIRECT DEPOSIT OF THE FOLLOWING CHECK(S) TO MY ACCOUNT FOR THE 2013 CROP:

****If you have a lien on your crop, you are required to get written permission from your lien holder to have your cotton proceeds direct deposited. (If proceeds are direct deposited, the lien holder will not be listed on the payment)****

COTTON PAYMENTS FOR THE 2013 CROP SEASON

Name: _____

Address: _____

Daytime Phone #: _____

Social Security # _____

Please deposit my check in the following account:

Bank Name: _____

Checking #: _____

Savings #: _____

Routing #: _____

Signature: _____

Please provide a cancelled check to insure information is correct.

Send completed form to 208 MEDICAL CENTER COURT • PRATTVILLE, ALABAMA • 36066