

Instructions for Redemption Application Form and Affidavit

(Do not mail instructions with application)

Application - A worksheet must be completed for each certificate claimed

Section A - Applicant Information (To be completed by applicant)

1. ___ I am the original producer. **Provide current address, sign and date below** and continue to section B.
(The original producer may be paid upon request with accompanying address update.)
 2. ___ I am not the original producer. I am the legal heir or beneficiary of the original producer identified in section B and I am entitled to payment as evidenced by the attached, NOTARTIZED affidavit.
(An applicant must prove that he is the valid beneficiary of funds due the original producer. This is done by completing the attached properly notarized affidavit.)
 3. Applicant
(An applicant must print their name)
 4. Phone
(Phone number, including area code of the applicant)
 5. Address
(An applicant must provide their complete mailing address including zip code)
 6. Signature
(The applicant must sign the form)
 7. Date
(The applicant must date the form the same day as signature)
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Section B - Producer Information (To be completed by applicant)

1. Producer's Name
(Please enter the name of the original producer of the tobacco)
2. Producer's Spouse
(Please enter the name of the producer's spouse. Having this information will assist in our search efforts)
3. Phone Number
(Phone number, including the area code of the original producer)
4. Business Name
(The producer may have farmed under a name other than his given name)
5. FC Member Number
(A six digit certificate number)
6. Business Tax ID #
(A federal tax ID # connected to the Business Name mentioned above)
7. Certificate Number
(Certificate numbers correspond to FC member numbers)
8. Farm # if known
(Farm service agency may or may be able to help find old farm #s)
9. Producer Social Security #
(Enter the original producer's social security number)
10. Spouse Social Security #
(Enter the original producer's spouse social security number)
11. Previous Address
(Enter the address at which the producer was living while he was selling tobacco)

12. Other Information

(List any other information that you think would be helpful)

Section C - Co-op Information (to be completed by the Co-op Staff)

(For Co-op staff to complete. Leave this area blank)

Affidavit – A notarized affidavit must be completed by the beneficiary or heir for all applications submitted for an original producer who is deceased

-Please list the original producer's name in the blank following "the deceased,"

-The deceased's FC Number and Tax ID Number

(Same information that you included on the application)

Please enter the date the deceased died.

(If you are unsure of the specific date, a month and/or year is fine)

Section A – The deceased died

You must check a box stating whether the original producer:

-left a will

-did not leave a will

Please list Beneficiaries and addresses

(Even if you are the sole beneficiary, you must still list your name and address. This is a separate form than the application. If there are multiple beneficiaries, please list all names and addresses. Please include a separate page if there is not enough room on the affidavit for everyone to be listed)

Section B – The estate of the deceased

You Must check a box stating whether the estate of the original producer:

-Is currently Open

(the estate is currently being administered and/or probated)

-is Closed

(the estate is closed and all matters have been handled)

Please sign the affidavit in front of a notary. The notary will then stamp and acknowledge that this information is true and was presented before them.

ADDITIONAL INFORMATION

There are three ways to submit an application:

Mail:

Certificate Redemption
1304 Annapolis Drive
Raleigh, NC 27608

Fax: 919-719-3950

E-Mail: tobaccocheck@usleaf.com

The application is to redeem a certificate of interest in the Capital Reserve for tobacco sold to the Cooperative, formerly known as Flue-Cured Tobacco Cooperative Stabilization Corporation, during the years of 1967-1973.

If you are the original producer, please fill out only the Application.

DO NOT forget to sign and date. If you fail to do so, this will result in an incomplete application.

If the original producer is deceased, all heir and beneficiaries **MUST** complete an application AND a notarized affidavit. Please complete **ONLY ONE** application. Each heir/beneficiary does not need a separate application.

All affidavit's must be completely filled out for the application to be accepted. If the following requirements are not met, the application will not be able to be processed.

*You **MUST** check a box in both section A & B.

*You **MUST** include beneficiary name and address information.

(Even if you are the applicant and sole beneficiary, you still must enter this information)

You **MUST** sign the affidavit.

A certified Notary will need to notarize that you presented them with factual information.

DO NOT mail death certificates and/or wills with your application and affidavit.

(This information is not necessary, and will slow the process)

Payments for approved applications are expected to be made within eight (8) weeks after the end of the submission period, February 28, 2017.

Applications postmarked, faxed or e-mailed AFTER February 28, 2017 will not be processed.

The value of the certificate of interest that is the subject of this application was reported to the IRS on a 1099 at the time the original certificate was issued. The redemption of the certificate of interest is not a taxable amount and 1099's will not be issued for redemptions paid.