IOUNIDEEDE DESE - COLETO	1701.70	DIG:		0.00		0/4/ //0= = 0:::=	VENE EN ANGUE	
JOHN DEERE : =85 B7 =5 @! APPLIC			URAL	& COM	IMER	CIAL USE EQUIPI	MENT FINANCING	
CUSTOMER INFORMATION (BUSINES	JAL):	AL): Social Security or Tax ID Number				. A Va 110 O''0		
Exact Individual or Organizational Legal Name			Social Security			Tax ID Number	Are You a US Citizen?	
	in Owner in the sale	L D-1(D	N'-41-			I Otu	☐ Yes ☐ No	
Phone Number (Home Phone for Individual/Business Phone f	or Organization)	Date of B	Birth			County		
Charak Address		O'th	City			Otata	1.7%	
Street Address		City				State	Zip	
Time at Current Address: Year s		/lonths						
CO-APPLICANT INFORMATION (IF A						[
Co-Applicant's Legal Name (Last, First, Middle, Suffix)			Social S		Security Number		Are You a US Citizen?	
Home Phone Number		Date of Birth					☐ Yes ☐ No	
						County		
Street Address		City	City			State	Zip	
ADDITIONAL BUSINESS/ORGANIZATIONAL INFORM			ATION (IF APPLICABLE):					
Business Type: ☐ Corporation ☐ General Partnership			State of Incorporation/Chief Executive Office Organizational ID (If Known)					
☐ Limited Partnership ☐ Limited Liability Company								
☐ Trust ☐ Other:								
Officer's Legal Name (If different than the Co-Applicant)		Social S	Social Security Number			Title of Officer or	Co-Applicant (if Co-App is Office	
Home Phone Number		Date of Birth				County		
Street Address		City				State	Zip	
		,					r	
Legal Name of Signing Party (Authorized Signer for the Organization, if different		than the Offi	han the Officer					
Legal Name of Signing Farty (Authorized Signer for the C	nganization, il dilierent	than the Oni	Cei)					
DEALER INFORMATION:								
Settlement Dealer Number	Selling Dealer Number				Dealer Contact Name			
Phone Number					E-mail Address			
Product Line/Usage:		Sales Pe	erson Nan	ne (If Differ	rent than	Contact)		
□Agriculture/ Agricultural □Turf/ Comr	mercial							
CUSTOMER FINANCIAL INFORMATION								
Have you ever filed for bankruptcy?		a lien/judgment been filed against you?			Financia	al Statement Date	Years in Farming/Business	
□ Yes □ No	□ Yes □ No	′es □ No						
Total Assets	Total Liabilities				Gross A	Annual Sales/Income*		
Type of Crop (Enter a maximum of three)			Type of Livestock (Enter			ter a maximum of three)		
			1		,	,		
OTHER INFORMATION AND CIONATI	IDEO							
OTHER INFORMATION AND SIGNATURES: Government Issued ID # ID Type			Expiration Date V			Verified By Dealer?		
Government issued iD #	ment Issued ID # ID Type		Expiration Date		,			
					☐ Yes ☐ No			
*You do not have to reveal alimony, child support	or separate mainter	nance incor	ne unles	s you wis	sh to ha	ve them considered for	approving this application.	
For the purposes of obtaining credit, I (we) certify	to Deere & Compa	ny and Dee	re Credit	Inc. (coll	lectively	v referred to as " John T	Deere") that all	
information in this statement is true and correct								
material changes since then. I (we) grant permis								
by my (our) other creditors. I (we) also grant Jol								
purposes. Such purposes include assisting in r								
grant permission to those creditors to provide all information with its affiliates. I (we) release and v								
verifying the above information. See Page 2 for			JOI G GITC	y (Our)	, outer t	sisaliois for all acts of	OTTINGOTORIO WINOTI OCCUP III	
	-							
Applicant's Signature	Title (For Organization	al Customers	Customers)			Date		
Co Applicant's Clanchine						Date		
Co-Applicant's Signature	Title (For Organization	iai Gustomers	1			Date		

FORM3008 Page 1 of 2

The Applicant acknowledges that (1) Seller has not represented that the terms of any financing obtained is more or less favorable than any other financing; (2) Seller is not applicant's agent in obtaining the financing; (3) Applicant may obtain financing from other sources; (4) Seller may be compensated by John Deere.

If your application to John Deere for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact the Agricultural Finance, Deere Credit Services, Inc., P.O. Box 6600, Johnston, IA 50131-6600 within 60 days from the date you are notified of your decision. We will send you a written statement of the reason for denial within 30 days of receiving your request. You may also call us at 1-800-828-8297.

NOTICE: The Federal Equal Opportunity Act prohibits creditors from discrimination against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.

All information regarding your account and any other accounts you may have with Deere & Company may be provided to corporate affiliates of Deere & Company and other companies which may offer or provide services to you or Deere & Company. Those affiliates may use certain consumer report information as a factor in establishing your eligibility for credit or insurance. If you object to this, you must notify us by calling 1-800-828-8297, and providing your name, Social Security number, address and account number and certain consumer report information will not then be provided to those affiliates.

Notice for Ohio Residents – The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Notice for Maine Residents - If this application is approved by the creditor, you will be required to obtain and maintain physical damage insurance on the collateral securing this debt. You have the right of free choice in the selection on the agent and insurer through which the insurance is placed.

FORM3008 Page 2 of 2