



REQUEST FOR EQUITY REDEMPTION Estate

Heritage Cooperative
59 Greif Pkwy.
Delaware OH 43015
Membership@HeritageCooperative.com
877.240.4393 Ext. 325

Please complete all applicable fields so we may properly process your request.

PLEASE NOTE: all information is held in the strictest confidence.

With the passing of

First Name

Last Name

I am requesting the redemption of equity in Heritage Cooperative.
Payment to be issued to:

First Name

Last Name

Business/Estate
if applicable

Address

City

State

County

ZIP

Phone

Mobile Phone

Email

Signature

Date

REQUESTS FOR REDEMPTION OF EQUITY ARE PRESENTED TO THE BOARD DURING THE FOLLOWING BOARD MEETINGS

BOARD MEETING	REQUEST DUE DATE
February	January 31
May	April 30
August	July 31
November	October 31

Please note: all redemptions are done at the discretion of the Board.
Upon approval, the redemption will be cultivated. Please allow 15 days post-meeting for processing.

PLEASE SUBMIT THE FOLLOWING WITH REQUEST

- Copy of Death Certificate
- Proof of Heir/Executor
- Any Common and/or Preferred Stock Certificates
Champaign Landmark, Farmers Commission, Agland Co-Op, or Heritage Cooperative
- Copy of K-1 form and/or Copy of Estate Distribution structure (single, multi)
Only required for LLC's or Corporations

INTERNAL USE ONLY:

Date Received:

Account #