



APPLICATION FOR ROVING GRAIN BUYER'S LICENSE
PUBLIC SERVICE COMMISSION
 SFN 52016 (Rev. 05-2001)

ANNUAL LICENSE PERIOD

EXPIRES JULY 31
 FEE \$200.00

NDCC 60-02.1

Individual or Firm Name Malteurop North America Inc.	Fax Number 414-671-1385	Telephone Number 414-671-1166	
Mailing Address 3830 West Grant Street	City Milwaukee	State WI	Zip Code 53215
Name of General Manager Dale West	Number of Haulers Requiring Certificate of License: 1		
Volume Estimate: How many bushels of grain do you expect to purchase or merchandise on behalf of its owners during your first year in operation? 300,000 bushels			

PARTNERS IF OPERATED BY A PARTNERSHIP

NAME	ADDRESS

NAMES & TITLES OF OFFICERS IF OPERATED BY A CORPORATION

TITLE	NAME	ADDRESS
President	Alain LeFloch	2 rue clement Ader. Reims 51685 France
Vice President	Dale West	3830 W. Grant Street Milwaukee WI 53215

STATE OF WI)
) SS
 COUNTY OF Milwaukee)

_____ being duly sworn, says he/she is the owner or official named in the foregoing application for Roving Grain Buyer's License, and that the facts stated in the application are true to his/her own knowledge.



 Signature of Applicant

Sworn to before me this 13th day of November, 2008

(Seal)



 (Notary Public)

My commission expires 07/03/2010