



**WIRE TRANSFER AUTHORIZATION-DOMESTIC**  
 BANK OF NORTH DAKOTA  
 OPERATIONS  
 SFN 18531 (2-2014)

Date 12/30/2014	Wire Transfer Amount \$ 461,042.75	Wire Transfer Fee \$ 0.00
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**ORIGINATOR INFORMATION**

Name ND PULBIC SERVICE COMMISSION		Account Number [REDACTED]		
Address 600 BLVD DEPT 408	City BISMARCK	State ND	ZIP Code 58505	Telephone Number (701) 328-4020

**RECEIVING BANK**

Bank Name HSBC BANK USA N.A.	Bank City SEATTLE	State WA	ABA Number [REDACTED]
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**BENEFICIARY BANK (if applicable)**

Bank Name	Bank City	State	ABA Number or Account Number
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**BENEFICIARY INFORMATION**

For Credit To ST HILAIRE SEED CO INC		Account Number [REDACTED]	
Address 415 BROADWAY AVE S	City ST HILAIRE	State MN	ZIP Code 56754
For Further Credit To		Account Number	
Additional Instructions or Comments			

It is understood that this transaction will be performed by the Bank as a convenience to the Customer and the Customer releases the Bank from responsibility for any inaccuracy, interruption or delay in transmission, and from claims occasioned in whole or in part by any circumstances beyond the Bank's control. The Customer agrees to indemnify and hold the Bank harmless from any loss, claim or damage to person or property arising out of this transaction, or the Customer's use of the services or materials provided as a result of the services provided under this transaction, provided such loss, claim or damage was not caused solely by the fault of the Bank. The Customer agrees that in no event shall the Bank be liable for indirect, special or consequential damages or loss of profit, notwithstanding notice to the Bank of the possibility of such damages or loss.

Originator is hereby on notice that the receiving bank may rely solely on the account number provided for the Recipient and that the originator is responsible for this wire transfer even if the account number names a person/account holder different from the named Recipient.

Source of Funds <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Deposit Account	OFAC Verified <input checked="" type="checkbox"/> Originator <input checked="" type="checkbox"/> Beneficiary
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Customer Signature 	Date 12/30/14
Retail Services Signature 	Retail Services Approval Date 12/30/14

**FOR ELECTRONIC BANKING USE ONLY**

Input By	Verified By	Sequence Number	OFAC Verified <input type="checkbox"/> Originator <input type="checkbox"/> Beneficiary
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**Richter, Susan K.**

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**From:** Richter, Susan K.  
**Sent:** Tuesday, December 30, 2014 9:16 AM  
**To:** Gallion, Joshua C.; Nitschke, Darrell D.  
**Cc:** Schmidt, Krista M.; Jeffcoat-Sacco, Illona  
**Subject:** Falkirk Farmers Elevator Insolvency Payment  
**Attachments:** WIRE INSTRUCTIONS for St Hilaire Seed Co.pdf; 194-010.pdf; 179-010.pdf

The appeal period in the subject insolvency has passed and we're ready to distribute trust fund proceeds. The only noncredit-sale contract claimant is St. Hilaire Seed Co., Inc. and all trust fund proceeds will go to St. Hilaire Seed Co., Inc. as ordered by the judge and per the judgment issued by the court. See paragraph 12 on page 3 of the Judge's Order (179-010.pdf) and paragraph 8 on page 2 of the Judgment (194-010.pdf).

Please obtain the account balance as of today, including all interest in the trust fund and accommodate a wire transfer today of the proceeds. St. Hilaire Seed Co., Inc.'s bank information is provided in the attached pdf. Close the trust fund after all trust fund proceeds have been wired.

If there are questions regarding wiring these trust fund proceeds, please let me know.

*Sue Richter*

Licensing Division  
ND Public Service Commission  
600 East Boulevard Ave, Dept. 408  
Bismarck, ND 58505-0480  
701-328-4097  
[srichter@nd.gov](mailto:srichter@nd.gov)