

Jeffcoat-Sacco, Illona

From: no-reply@tylerhost.net
Sent: Thursday, April 23, 2015 4:37 PM
To: Jeffcoat-Sacco, Illona
Subject: Notification of Service for Case No. 18-2015-CV-00240 (Public Service Commission, et al. vs. Grand Forks Bean Company, Inc.)

This is a service filing for Case No. 18-2015-CV-00240, Public Service Commission, et al. vs. Grand Forks Bean Company, Inc..

Date Submitted: 4/23/2015 4:32:45 PM
Filing Code: Exhibit
Filing Desc: Exhibit F to Claim of Bremer Bank
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The following are service contacts on this filing:
Other Service Contacts not associated with a party on the case:

Jon Brakke (jbrakke@vogellaw.com)

Daniel Gaustad (dan@grandforkslaw.com)

Russ Melland (rmelland@camrudlaw.com)

Tracy Kennedy (tracykennedy@northdakotalaw.net)

Susan Richter (srichter@nd.gov)

Daniel Gaustad (dan@grandforkslaw.com)

John Schroeder (jschroeder@northdakotalaw.net)

Public Service Commission:

Illona Jeffcoat-Sacco (ijs@nd.gov)

Casey Furey (cfurey@nd.gov)

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85 **GE-15-36** Filed: 4/23/2015 Pages: 4
Notification of Service – Exhibit F to Claim of Bremer Bank

Bremer Bank, National Association
John Schroeder, Zimney Foster P.C.

For assistance, contact the North Dakota Court's Information Technology Department at 701.328.4218. Support is available 8 a.m. to 5 p.m. CT, Monday through Friday.

EXHIBIT F

UNIFORM COMMERCIAL CODE FINANCING STATEMENT - UCC-1

FILE NUMBER	DATE	TIME	COUNTY FILED
D 05-000274431-0	09/30/2005	03:54:21.3 PM	ND SEC OF ST

DEBTORS:

ORGANIZATION
 GRAND FORKS BEAN COMPANY INC.
 2120 N WASHINGTON ST
 GRAND FORKS ND 58203 1447

SECURED PARTIES:

ORGANIZATION
 ALERUS FINANCIAL N.A.
 2300 S COLUMBIA RD
 GRAND FORKS ND 58206 6001

COLLATERAL INFORMATION:

COLLATERAL

ALL INVENTORY, EQUIPMENT, ACCOUNTS, INSTRUMENTS, DOCUMENTS, CHATTEL PAPER, GENERAL INTANGIBLES, DEPOSIT ACCOUNTS NOW OWNED & OWNED IN THE FUTURE.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Alerus Financial, N. A.
P.O. Box 6001
Grand Forks, ND 58206-6001

ND-507
09-30-05 3:54 p.m.
05-274431-0

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME
Grand Forks Bean Company Inc.

OR
1b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX

1c. MAILING ADDRESS
2120 N Washington St

CITY Grand Forks	STATE ND	POSTAL CODE 58203-1447	COUNTRY
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1d. TAX ID #: SSN OR EIN
3048

ADD'L INFO RE ORGANIZATION DEBTOR

1e. TYPE OF ORGANIZATION

1f. JURISDICTION OF ORGANIZATION
ND

1g. ORGANIZATIONAL ID #, if any
21261200 NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR
2b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX

2c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY

2d. TAX ID #: SSN OR EIN

ADD'L INFO RE ORGANIZATION DEBTOR

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

2g. ORGANIZATIONAL ID #, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME
Alerus Financial, N. A.

OR
3b. INDIVIDUAL'S LAST NAME

FIRST NAME	MIDDLE NAME	SUFFIX

3c. MAILING ADDRESS
P.O. Box 6001

CITY Grand Forks	STATE ND	POSTAL CODE 58206-6001	COUNTRY
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4. This FINANCING STATEMENT covers the following collateral:

All inventory, equipment, accounts, instruments, documents, chattel paper, general intangibles, deposit accounts now owned and owned in the future.

SEP 3 11
EBS

5. ALTERNATIVE DESIGNATION [If applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] All Debtors Debtor 1 Debtor 2 (optional)

8. OPTIONAL FILER REFERENCE DATA

Bankers Systems 9/20/05