



GRAIN CLAIM FORM
 PUBLIC SERVICE COMMISSION
 SFN 60853 (01/2019)



In accordance with North Dakota Century Code Chapters 60-02, 60-02.1, and 60-04:

Any person with a noncredit-sale receipt holder claim or any person with a credit-sale contract claim shall file the claim with the Public Service Commission. A claim must be filed within 45 days after the final publication of the "Notice of Appointment as Trustee and Notice to File Claims."

Any person filing a claim shall include receipts or other documentation sufficient to enable the Commission to determine the validity of the claim. This could include unsatisfied grain receipts, scale tickets, checks, cash contracts, credit-sale contracts, or other memoranda given by the licensee for, or as evidence of, the receipt, storage, or sale of grain.

Unless a claim is filed with the Public Service Commission within the time specified, the Commission is relieved of further duty or action on behalf of the receipt holder or credit-sale contract claimant and the receipt holder or credit-sale contract claimant may be barred from payment for any amount due.

FOR COMMISSION USE ONLY	
PSC Case Number:	
Civil Number:	

CLAIMANT INFORMATION			
Claimant Name (as used on income tax return) <i>Derek Morey</i>		Telephone Number <i>701-509-9676</i>	
Mailing Address <i>10901 86th St SE</i>		Email Address <i>d-morey@farmmail.com</i>	
City <i>Minot</i>	State <i>ND</i>	ZIP Code <i>58701</i>	

CLAIM AGAINST			
Name of Grain Warehouse or Grain Buyer <i>Midwest Grain Trading / North Dakota Grain</i>		Telephone Number <i>701-662-1022</i>	
Address <i>2373 65 1/2 St NE</i>		Email Address	
City <i>Rugby</i>	State <i>ND</i>	ZIP Code <i>58368</i>	

Did you make written demand for payment or redelivery if available? No Yes, date of written demand: _____

ADDITIONAL PARTIES WITH AN INTEREST IN THE CLAIM			
List each interested party in this unpaid grain claim. Attach additional pages if necessary.			
Name (as used on income tax return)	Telephone Number		
Mailing Address	City	State	ZIP Code
Email Address	Interest	% of Claim or \$ Amount	
Name (as used on income tax return)	Telephone Number		
Mailing Address	City	State	ZIP Code
Email Address	Interest	% of Claim or \$ Amount	
Name (as used on income tax return)	Telephone Number		
Mailing Address	City	State	ZIP Code
Email Address	Interest	% of Claim or \$ Amount	

CLAIM SUMMARY

Use one line per commodity. Attach additional pages if necessary.

Date	Type of Grain	Price per Bushel/CWT	Net Bushel/CWT Indicate Bu. or CWT below	Amount Owed
11-2-18	spring wheat	\$ 6.00 + protein	23,719.12 Bu. / CWT	\$ 145,889.80
		\$	Bu. / CWT	\$
		\$	Bu. / CWT	\$
		\$	Bu. / CWT	\$
Total Amount of Claim			Bu. / CWT	\$

Briefly describe your claim using the space below. Please include any of the following: details of your agreement/contract, grain on storage, grain broker involvement, any additional information you wish to add.

On 8-2-18 I contracted 24,000 bu of spring wheat with midwest grain trading I was in contact Chris Peters. I think in September they started hauling in from my grain bins. The trucking was included in the price. I had another 9,000 bu contracted with them, but they went insolvent before they picked it up, they hauled my grain to Elevators to be sold right away and sent me a check, but canceled it so after.

Are any offsets owed? No Yes, provide amount and detail.

Farm Credit Services of ND has a lien on my crops
My loan officer is Scott Hodenfield 701-852-1265

CLAIM DOCUMENTS

Attach copies of the following support documents if applicable to your claim:

- Scale Tickets
- Warehouse Receipts
- Settlement/Assembly Sheets
- Purchase Contracts
- Credit-Sale Contracts
- NSF Checks
- Written Demand for Payment or Redelivery sent to Grain Warehouse and/or Grain Buyer
- Any additional information you wish to include.

Please indicate below if your claim documents are enclosed or if they were previously submitted (if applicable, check both boxes).

Claim Documents Enclosed

Claim Documents Previously Submitted

NOTE: Lien searches will be done. If an active lien is found, any or each lien holder will be included as a payee on the check and a copy of the check will be mailed to the active lien holder(s).

Mail completed form and claim documents to:

Public Service Commission
600 E. Boulevard Ave., Dept. 408
Bismarck, ND 58505-0480

I certify under penalty of perjury that the information stated in and attached to this grain claim is true and correct.

Signature of Individual Filing Grain Claim <i>Derek May</i>	Date 2-11-19
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