IT IS HEREBY AGREED, that ______________________________________________________
of ____________________________________________________________________________________
as Principal, and ________________________________________________________________________
as Surety, are jointly and severally held and firmly bound to the state of Minnesota in the amount of
_________________________________________Dollars, for the payment of which, well and truly to be
made, we hereby bind ourselves, our heirs, executors, administrators, representatives, successors, and
assigns, pursuant to Minn. Stat. Chapter 27 and rules there under.

NOW, THEREFORE, THE CONDITIONS OF THIS BOND ARE AS FOLLOW:

(a) The Principal shall be duly licensed and shall faithfully perform the duties imposed upon a
    licensed wholesale produce dealer and shall observe all laws and rules pertaining to such
    business within the state pursuant to Minn. Stat. Chapter 27 and the rules there under; and
(b) Shall make prompt payment when due of the purchase price of all produce purchased; and
(c) The prompt settlement and payment of all claims and charges due the state for services
    rendered or otherwise; and
(d) The prompt reporting of all Consignment sales, as required by law, to persons consigning
    produce to license for sale on commission; and
(e) The prompt payment of the proceeds of consignment sales to the persons entitled to such
    proceeds, less lawful charges, disbursements and commissions.

Observance of the aforesaid conditions shall render this bond null and void, otherwise the bond shall remain in full force and effect.

In accordance with the provisions of Minn. Stat. Chapter 27, and rules there under, this bond shall be effective only when notice of
default is duly given to the Commissioner of Agriculture.

The acts or failures of authorized agents or representatives of said Principal shall be construed to be the acts or failures of said
Principal and to be within the protection of this bond to the same extent and in the same manner as if they were the personal acts of
said principal.

This bond shall be in effect for one year and shall automatically renew on its annual anniversary date unless a written notice of
termination is delivered to the Commissioner of Agriculture, by Principal or Surety, at least (60) days prior to any such annual
anniversary date.

The effective date of this bond is ___________________________________________ and the anniversary
Date is ____________________________________________ of each succeeding year.

Dated:___________________________________                     PRINCIPAL
        (OWNER )_________________________________

Dated: __________________________________   SURETY
        By: __________________________________

Countersigned by:

________________________________________  Surety Seal

Minnesota Resident Agent

Dated: __________________________________

Ag-00862-07
Sole Proprietor

ACKNOWLEDGEMENT BY PERSONAL PRINCIPAL

STATE OF MINNESOTA )
County of ______________ )

On this _____ day of ______________ , 20____, before me personally appeared

_________________________________________________ to me known to be the person described
in and who executed the foregoing bond, who being duly sworn states that (s)he is the sole owner of the
aforesaid wholesale produce business, and acknowledged that (s)he freely executed said bond.

____________________________________
Notary Public

My commission expires ________________

ACKNOWLEDGMENT BY CORPORATE SURETY
(Complete the following or attach Surety Form)

STATE OF MINNESOTA )
County of ____________ )

__________________________________________,
being first duly sworn, states that (s)he is the
___________________________________________ of the Surety in the foregoing bond; that the seal
affixed thereto is the corporate seal of such Surety, that said instrument was executed on behalf of said
Surety by authority of its board of directors, and

 Acknowledged said instrument to be the free act of said corporation.

Subscribed and sworn to me this _____ day
of ______________ , 20____.  

___________________________________
Notary Public

My commission expires ________________

_____________________________________

Business address of Attorney-in-Fact executing the foregoing bond:

______________________________________________

Insurance agent’s name and address:

____________________________________________________________________________________