



2015 CBOT Wheat Futures Class Action Settlement
ELECTRONIC CLAIM FILING GUIDELINES



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Overview

Electronic Claim Filing applies to institutions or entities that are filing multiple Proofs of Claim and Release on behalf of themselves and/or others, as well as individuals or entities that are filing Proofs of Claim and Release with a large number of transactions (50+).

Electronic Claim Filings are subject to rejection if not prepared in compliance with these Electronic Claim Filing Guidelines.

PLEASE NOTE: No Electronic Claim Filing will be considered to have been properly submitted unless the Claims Administrator issues to the filer a written acknowledgment of receipt and acceptance of electronically submitted data.

Electronic Filing Requirements

Complete and Sign a Proof of Claim and Release:

- One executed Proof of Claim and Release should be completed per submission. This Proof of Claim and Release serves as a master Proof of Claim and Release for one or all of the accounts included on your file. The Proof of Claim and Release is attached hereto as Appendix B.
- Separate Claims should be submitted for each separate legal entity (*e.g.*, a claim from joint owners should not include separate transactions of just one of the joint owners, and an individual should not combine his or her IRA transactions with transactions made solely in the individual's name). Conversely, a single Claim should be submitted on behalf of one legal entity including all transactions made by that entity, no matter how many separate accounts that entity has (*e.g.*, a corporation with multiple brokerage accounts should include all transactions made in all accounts on one Claim).
- Complete the first page of the Proof of Claim and Release. Be sure to include company name, account name/number, and company address. If submitting an electronic file on behalf of several accounts, enter "Various Accounts" for the account name/number.
- Complete the signature page on the Proof of Claim and Release. If you are filing on behalf of your clients, you must include a letter or document providing your authorization to sign on behalf of your clients, as set forth in Appendix C.
- A valid email address must be on file with the Claims Administrator. Communication regarding deficiencies and rejections on electronically filed claims may be conducted by email. A valid email address **MUST** be included on the Proof of Claim and Release, and the email address provided **MUST** be updated in the event the contact person or email address changes; it is the sole responsibility of the filing party to maintain up-to-date, complete contact information with the Claims Administrator.

Prepare a cover letter:

- A cover letter **MUST** be included with the master Proof of Claim and Release. The cover letter must include the total number of accounts; total number of transactions; total number of contracts purchased, acquired, and sold; and contact name(s) with phone number(s) and email address(es). Please see the sample cover letter as set forth in Appendix D.

Prepare a data file:



- An Excel spreadsheet or other electronic file containing account information and transactional data **MUST** be prepared in accordance with A.B. Data, Ltd.'s Electronic Claim Filing Template Mapping Instructions found in Appendix E. The following formats are acceptable: a) MEDIA: CD, DVD, and FLASH DRIVE and b) DATA: ASCII, MS EXCEL, and MS ACCESS. For your convenience, an Excel spreadsheet template is available for your use and may be downloaded from www.2015CBOTWheatFuturesClassActionSettlement.com.
- If you cannot provide the information in the aforementioned formats or you have other requests, questions, concerns, or comments, please email A.B. Data, Ltd., at efiling@abdata.com or you may call 877-234-6578 to speak to an Electronic Claims Filing Specialist.

Mail your executed master Proof of Claim and Release with a cover letter and media format to:

CBOT WHEAT FUTURES OR OPTIONS CLASS ACTION SETTLEMENT
 ATTN: ELECTRONIC CLAIMS DEPARTMENT
 C/O A.B. DATA, LTD.
 PO BOX 170300
 MILWAUKEE, WI 53217

Or:

CBOT WHEAT FUTURES OR OPTIONS CLASS ACTION SETTLEMENT
 ATTN: ELECTRONIC CLAIMS DEPARTMENT
 C/O A.B. DATA, LTD.
 3410 WEST HOPKINS STREET
 MILWAUKEE, WI 53216

Documentation Requirements

A.B. Data, Ltd., reserves the right to request additional documentation at any time after your Proof of Claim and Release and file have been received and processed. The documentation provided should be sufficient to verify the validity and accuracy of the data provided in the file.

If you provided a letter/affidavit attesting to the truth and accuracy of your data when initially submitting your file, A.B. Data may still require specific documentary evidence (trade confirmations, monthly statement, or equivalent) to verify the details of your transactions and/or holdings.

How to account for Free Receipts, Free Deliveries, and Transfers

Free receipt, free delivery, and transfer transactions are not eligible for payment unless you have additional information regarding the original purchase, acquisition, or subsequent sale. If you do not have this information, free receipt, free delivery, and transfer transactions should only be included on your electronic file for balancing purposes. You **MUST** use the following instructions when filing for accounts that have free receipt, free delivery, and transfer transactions during the Class Period:

If CONTRACTS were transferred to or from a different custodian (corresponding account is not on your electronic file), you must follow these instructions:

- **CONTRACTS RECEIVED INTO ACCOUNT:** You must account for any received contracts by providing the opening position or original purchase or acquisition of these contracts from the prior account.
- **CONTRACTS DELIVERED OUT OF ACCOUNT:** You must account for any delivered contracts by providing the sale and/or closing position from the subsequent account.



- NO INFORMATION AVAILABLE ON ORIGINAL PURCHASE/ACQUISITION or SUBSEQUENT SALE: You must provide the free receipt and/or free delivery contracts in order to balance your claim. A “transfer in” should be reflected as transaction type “FR,” and a “transfer out” should be reflected as transaction type “FD” (prices and net amounts should be zero).

If CONTRACTS were transferred between accounts on your file, you must follow these instructions:

- DO NOT claim the same purchase or acquisition transaction(s) on both accounts.
- The account that owned the contracts most recently should be the account claiming the eligible purchase or acquisition. These contracts should already be accounted for in the sales and/or closing position of the most recent account.
- If contracts were transferred between accounts for the same beneficial owner on your file, you must combine these accounts and file all eligible purchases, acquisitions, and sales in a single claim. You must also include all opening and closing positions on the claim for that entity.
- If you are unable to combine these accounts accordingly, you must provide the free receipt and free delivery contracts in order to balance your claim. A “transfer in” should be reflected as transaction type “FR,” and a “transfer out” should be reflected as transaction type “FD” (prices and net amounts should be zero).

Claim Balancing

All securities for each Claim must balance. This means all purchases / acquisitions (including free receipts) from January 31, 2015 through and including May 15, 2015, MUST EQUAL the total sales (including free deliveries) from January 31, 2015 through and including May 15, 2015, plus the closing position. **(O+P+FR=S+FD+C).**

Negative values may only be given for short opening or closing positions. All other transactions must be positive values.

Appendix A

Case Specific Information

CLASS DEFINITION:	All Persons or entities that transacted in CBOT Wheat Futures or Options during the period from February 1, 2015 through May 15, 2015 (the “Settlement Class Period” or “Class Period”).
CLAIM FILING DEADLINE:	July 10, 2023

Transactions for each account should include:

Transaction Type	Definition	Valid Dates
O	Total position of contracts at the beginning of the Class Period.	February 1, 2015
P	Purchases/acquisitions during the Class Period.	February 1, 2015 through May 15, 2015, inclusive
FR	Transfer into account during the Class Period.	February 1, 2015 through May 15, 2015, inclusive
S	Sales during the Class Period.	February 1, 2015 through May 15, 2015, inclusive
FD	Transfer out to another account during the Class Period.	February 1, 2015 through May 15, 2015, inclusive
C	Total position of contracts at the close of trading at the end of the Class Period.	May 15, 2015

*****Please see Appendix E for mapping instructions detailing how to properly submit your file. Files submitted that do not follow the mapping instructions are subject to rejection.**



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Appendix B



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**UNITED STATES DISTRICT COURT
DISTRICT OF KANSAS**

BUDICAK, INC., BLUE MARLIN
ARBITRAGE, LLC, and PRIME TRADING,
LLC, individually and on behalf of all others
similarly situated,

Plaintiffs,

v.

LANSING TRADE GROUP, LLC, CASCADE
COMMODITY CONSULTING, LLC, and
JOHN DOES NOS. 6-10,

Defendants.

Case No. 2:19-cv-02449

Hon. Toby Crouse

Magistrate Judge Angel D. Mitchell

PROOF OF CLAIM AND RELEASE

I. INSTRUCTIONS

1. If you transacted in CBOT Wheat Futures or Options from February 1, 2015 through May 15, 2015 (the “Class Period”), you may be eligible to receive a payment from the \$18 million settlement reached between Plaintiffs and Defendant Lansing Trade Group, LLC (“Lansing”) in *Budicak, Inc., et al. v. Lansing, et al.*, No. 19-cv-2449 (D. Kan.).

2. “CBOT Wheat Futures or Options” means wheat futures and options contracts that trade on the Chicago Board of Trade (“CBOT”). Pursuant to the Distribution Plan, CBOT Wheat Futures or Options consist of:

- a. “Wheat Futures,” which means CBOT soft red winter wheat futures contracts expiring in March 2015, May 2015, July 2015, or September 2015; and
- b. “Options on Wheat Futures,” which means any options on the above-defined Wheat Futures contracts.

3. Unless otherwise defined herein, all capitalized terms contained in this Proof of Claim and Release (“Claim Form”) have the same meaning as in the **Notice of Proposed Class Action Settlements, June 9, 2023 Fairness Hearing Thereon, and Class Members’ Rights** (“Notice”), the Stipulation and Agreement of Settlement between Plaintiffs and Lansing, and the Distribution Plan, which are available at www.2015CBOTwheatfuturesclassactionsettlement.com (the “Settlement Website”).

4. It is important that you read the Notice. By signing and submitting this Claim Form, you will be certifying that you have read the Notice, including the terms of the Release and Covenant Not to Sue described in the Notice under the heading “What Am I Giving Up to Receive a Payment?” and provided for in the Lansing Settlement Agreement.

5. To be eligible to receive a payment from the Net Settlement Fund, you must submit a timely and valid Claim Form along with the required data and/or information described in Parts II through IV below. **To be considered timely, your Claim Form must be submitted online at www.2015CBOTwheatfuturesclassactionsettlement.com by 11:59 p.m. Eastern Time on July 10, 2023, OR mailed to the Settlement Administrator and postmarked no later than July 10, 2023.** If you are unable to submit the required data as described below at Parts II through IV, you should call the Settlement Administrator for further instructions.

6. As described in Part III below, you are required to submit additional information about your transactions in CBOT Wheat Futures or Options as part of your Claim Form to be submitted to the Settlement Administrator.

7. Your payment amount will be determined based on the Settlement Administrator’s review of your Claim Form and calculated pursuant to the Distribution Plan that the Court approves. Submission of a Claim Form does not guarantee that you will receive a payment from the Lansing Settlement. For more information, please refer to the Notice and Distribution Plan available at the Settlement Website.

8. Separate Claim Forms should be submitted for each separate legal entity. Conversely, a single Claim Form should be submitted on behalf of only one legal entity.

This Form Must Be Electronically Submitted OR Mailed AND Postmarked No Later Than July 10, 2023.

9. If you have questions about submitting a Claim Form or need additional copies of the Claim Form or the Notice, you may contact the Settlement Administrator.

II. CLAIMANT IDENTIFICATION

The Settlement Administrator will use this information for all communications relevant to this Claim Form. If this information changes, please notify the Settlement Administrator in writing. If you are a trustee, executor, administrator, custodian, or other nominee and are completing and signing this Claim Form on behalf of the Claimant, you must attach documentation showing your authority to act on behalf of Claimant.

Section A – Claimant Information

Claimant's First Name	MI	Claimant's Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Co-Claimant's First Name	MI	Co-Claimant's Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Entity Name (if Claimant is not an individual)

Representative or Custodian Name (if different from Claimant[s] listed above)

Address 1 (street name and number)

Address 2 (apartment, unit, or box number)

City	State	ZIP Code/Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Province/Region (if outside U.S.)

Country

Claimant Tax ID (For most U.S. Claimants, this is their individual Social Security Number, Employer Identification Number, or Taxpayer Identification Number. For non-U.S. Claimants, enter a comparable government-issued identification number.)

Telephone Number (home or cell)	Telephone Number (work)
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

Email Address (If you provide an email address, you authorize the Settlement Administrator to use it in providing you with information relevant to this claim.)

This Form Must Be Electronically Submitted OR Mailed AND Postmarked No Later Than July 10, 2023.

Section B – Authorized Representative Information

Name of the person you would like the Settlement Administrator to contact regarding this claim (if different from the Claimant name listed above)

First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Telephone Number (home or cell)	Telephone Number (work)
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

Address 1 (street name and number)

Address 2 (apartment, unit, or box number)

City	State	ZIP Code/Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Province/Region (if outside U.S.)

Email Address (If you provide an email address, you authorize the Settlement Administrator to use it in providing you with information relevant to this claim.)

This Form Must Be Electronically
Submitted OR Mailed AND Postmarked No
Later Than July 10, 2023.

III. REQUIREMENTS FOR CLAIM SUBMISSION

1. YOU MUST SUBMIT YOUR CLAIM FORM ELECTRONICALLY OR ON PAPER IN THE REQUIRED FORMAT

Claimants must electronically submit their Claim Forms online at www.2015CBOTwheatfuturesclassactionsettlement.com by **11:59 p.m. Eastern Time on July 10, 2023**, OR mail the Claim Forms to the Settlement Administrator at CBOT Wheat Futures or Options Class Action Settlement, c/o A.B. Data, Ltd., P.O. Box 170300, Milwaukee, WI 53217 so they **are postmarked no later than July 10, 2023**. Claim Forms must be submitted in the format specified in this Claim Form or posted by the Settlement Administrator on the Settlement Website.

Along with your Claim Form, you are required to submit the details of your transactions in CBOT Wheat Futures or Options reflected in Part IV, below. A Data Template, including the information you must provide about your transactions in CBOT Wheat Futures or Options, is below and also available at the Settlement Website. In addition, please provide any of the following types of supporting documentation that verifies the transaction information you provide:

- a. Transaction data from your bank, broker, or internal trade system;
- b. Bank confirmations by individual trade;
- c. Bank transaction reports or statements;
- d. Trading venue transaction reports or statements;
- e. Prime broker reports or statements;
- f. Custodian reports or statements;
- g. Daily or monthly account statements or position reports;
- h. Email confirmations from counterparty evidencing transactions;
- i. Bloomberg confirmations or communications evidencing transactions; and/or
- j. Other documents evidencing transactions in CBOT Wheat Futures or Options during the Class Period.

This Form Must Be Electronically Submitted OR Mailed AND Postmarked No Later Than July 10, 2023.

IV. TABLE OF TRANSACTIONS IN CBOT WHEAT FUTURES OR OPTIONS

Complete this Part IV if and only if you entered into transactions in CBOT Wheat Futures or Options from February 1, 2015, through May 15, 2015. Do not include information regarding instruments other than CBOT Wheat Futures or Options and do not include transactions in CBOT Wheat Futures or Options in which you acquired the instrument as an agent for another individual or entity.

List of Brokers or Futures Commission Merchants

Please list all brokers or futures commission merchants (“FCMs”) at which you maintained accounts in which you traded or held CBOT Wheat Futures or Options.

List of Account Names and Account Numbers

Please provide a list of all account names and account numbers for each entity you listed in response above in which you traded or held CBOT Wheat Futures or Options.

This Form Must Be Electronically Submitted OR Mailed AND Postmarked No Later Than July 10, 2023.

WHEAT FUTURES

For your **Wheat Futures contracts**, provide your end of day positions and the average price of those positions as of **JANUARY 31, 2015**:

Contract Traded (Description, Code, or Contract Month/Year)	Net Number of Contracts	Average Price (U.S. dollars per bushel)	Net Position (Long ("L")/ Short ("S"))

For each purchase or sale of **Wheat Futures contracts** during the Class Period, provide the following information for each transaction:

Contract Traded (Description, Code, or Contract Month/Year)	Trade Date	Number of Contracts	Transaction Price (U.S. dollars per bushel)	Purchase or Sale	Brokerage Firm and Account Number in Which Transaction Was Made

This Form Must Be Electronically Submitted OR Mailed AND Postmarked No Later Than July 10, 2023.

For your **Wheat Futures contracts**, provide your end of day positions and the average price of those positions as of **MAY 15, 2015**:

Contract Traded (Description, Code, or Contract Month/Year)	Net Number of Contracts	Average Price (U.S. dollars per bushel)	Net Position (Long ("L")/ Short ("S"))

OPTIONS ON WHEAT FUTURES

For your **Options on Wheat Futures**, provide your end of day positions and the average price of those positions as of **JANUARY 31, 2015**:

Option Contract Traded (Description, Code, or Contract Month/Year)	Net Number of Contracts	Average Price (U.S. dollars per bushel)	Strike Price	Net Position	Put ("P") or Call ("C")

This Form Must Be Electronically Submitted OR Mailed AND Postmarked No Later Than July 10, 2023.

For each purchase or sale of **Options on Wheat Futures** during the Class Period, please provide the following information for each transaction:

Option Contract Traded (Description, Code, or Contract Month/Year)	Trade Date	Number of Contracts	Traded Price (price of futures contract)	Option Type (Call/Put)	Option Expiry Type	Option Strike Price	Option Premium	Option Settlement/Exercise Date	Brokerage Firm and Account Number in Which Transaction Was Made

For your **Options on Wheat Futures**, provide your end of day positions and the average price of those positions as of **May 15, 2015**:

Option Contract Traded (Description, Code, or Contract Month/Year)	Net Number of Contracts	Average Price (U.S. dollars per bushel)	Strike Price	Net Position	Put ("P") or Call ("C")

V. CLAIMANT'S CERTIFICATION & SIGNATURE

SECTION A: CERTIFICATION

BY SIGNING AND SUBMITTING THIS CLAIM FORM, CLAIMANT OR CLAIMANT'S AUTHORIZED REPRESENTATIVE CERTIFIES ON CLAIMANT'S BEHALF AS FOLLOWS:

1. I (we) have read the Notice and Claim Form, including the descriptions of the Release and Covenant Not to Sue provided for in the Settlement Agreement;
2. I (we) am (are) a Class Member and am (are) not one of the individuals or entities excluded from the Settlement Class;
3. I (we) have not submitted a Request for Exclusion;
4. I (we) have made the transactions submitted with this Claim Form for myself (ourselves) and not as agents of another, and have not assigned my (our) Settled Claims to another;
5. I (we) hereby warrant and represent that I (we) have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any matter released pursuant to the release or any other part or portion thereof;
6. I (we) have not submitted any other claim in this Action covering the same transactions and know of no other person having done so on his/her/its/their behalf;
7. I (we) hereby consent to the disclosure of, waive any protections provided by any applicable bank secrecy or data privacy laws (whether foreign or domestic), or any similar confidentiality protections with respect thereto, and instruct Settling Defendants or any authorized third party to disclose my (our) information and transaction data relating to my (our) trades for use in the claims administration process;
8. I (we) submit to the jurisdiction of the Court with respect to my (our) claim and for purposes of enforcing the releases set forth in any Final Judgment that may be entered in the Action;
9. I (we) agree to furnish such additional information with respect to this Claim Form as the Settlement Administrator or the Court may require; and
10. I (we) acknowledge that I (we) will be bound by and subject to the terms of the Final Judgment that will be entered in the Action if the Settlement is approved.

SECTION B: SIGNATURE

PLEASE READ THE RELEASE, CONSENT TO DISCLOSURE, AND CERTIFICATION, AND SIGN BELOW.

I (we) acknowledge that, as of the Effective Date of the Settlement, pursuant to the terms set forth in the Settlement Agreement, and by operation of law and the Final Judgment, I (we) shall be deemed to release and forever discharge and shall be forever enjoined from prosecuting the Settled Claims against the Released Parties (as defined in the Settlement Agreement and/or Final Judgment). I (we) shall not hereafter seek to establish liability against any Released Party or any other Person based on the facts, conduct, or events during the Class Period underlying this Action.

By signing and submitting this Claim Form, I (we) consent to the disclosure of information relating to my (our) transactions in CBOT Wheat Futures or Options during the Class Period, and waive any protections provided by any applicable bank secrecy or data privacy laws (whether foreign or domestic), or any similar confidentiality protections with respect to information and transaction data relating to my (our) trades, for use in the claims administration process.

If signing as an Authorized Representative on behalf of an entity, I (we) certify that I (we) have legal rights and authorization from the entity to file this Claim Form on the entity's behalf.

UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA, I (WE) CERTIFY THAT ALL THE INFORMATION PROVIDED BY ME (US) ON THIS CLAIM FORM IS TRUE, CORRECT, AND COMPLETE AND THAT THE DATA SUBMITTED IN CONNECTION WITH THIS CLAIM FORM ARE TRUE AND CORRECT COPIES OF WHAT THEY PURPORT TO BE.

Signature of Claimant (if Claimant is an individual filing on his or her own behalf)

Date: _____
MM/DD/YY

Print Name of Claimant (if Claimant is an individual filing on his or her own behalf)

Authorized Representative Completing Claim Form (if any)

Date: _____
MM/DD/YY

Print name of Authorized Representative Completing Claim Form (if any)

Capacity of Authorized Representative (if other than an individual (e.g., trustee, executor, administrator, custodian, or other nominee))

REMINDER: YOUR CLAIM FORM AND REQUIRED DATA MUST BE SUBMITTED ONLINE BY 11:59 P.M. EASTERN TIME ON JULY 10, 2023, OR MAILED AND POSTMARKED NO LATER THAN JULY 10, 2023.

Appendix C

Authorization Requirements

If you are a nominee filing on behalf of your account holders, you must include the following documentation:

- Affidavit attesting that your entity has legal rights and authorization from your account holders to file Proofs of Claim and Release on their behalf **and** that your account holders understand that they are bound by and subject to the terms of all releases that may be entered in this Settlement, etc.; and
- Authorization to sign on your account holders' behalf.

If you are a third party filing on behalf of a nominee, you must include an Affidavit attesting to the following:

- Your entity has the legal right and authorization from the nominee to file and sign any Proofs of Claim and Release on their behalf;
- Your entity has the legal right and authorization from the nominee's account holders to file and sign any Proofs of Claim and Release on their behalf; and
- The account holders understand they are bound by and subject to the terms of all releases that may be entered in the Action.

If you are a third party filing on behalf of another party, you must include an Affidavit attesting to the following:

- Your entity has the legal right and authorization from the other party to file and sign any Proofs of Claim and Release on its behalf; and
- The other party understands it is bound by and subject to the terms of all releases that may be entered in the Action.

If you are not a nominee or a third party and would like to file claims electronically, you must include documentation supporting all transactional data of your claim as follows:

- Documents may include, but are not limited to, a) photocopies of stockbrokers' confirmation slips; b) photocopies of stockbrokers' monthly statements reflecting ALL transactional data and how it was compiled for the opening of the Class Period through the end of the Class Period; or c) a signed letter from your broker, on their letterhead, providing all of the information that would be found on a confirmation slip and/or other aforementioned documents.



Appendix D
Sample Cover Letter

LETTERHEAD

Re: 2015 CBOT Wheat Futures or Options Class Action Settlement

Date:

Enclosed is a fully executed master Proof of Claim and Release with required authorizations and affidavits as well as an electronic media attachment, which is being filed in connection with the above-referenced matter on behalf of [COMPANY NAME(S) OR INDIVIDUAL NAME(S)] for the proprietary accounts of [ENTITY].

We, [ENTITY], hereby agree that further communication from the Claims Administrator may be conducted by email, and we accept sole responsibility to ensure the email address for [ENTITY] is updated in the event the email address provided on the master Proof of Claim and Release should change.

The attachment consists of a [CD, DVD, OR FLASH DRIVE] containing [NUMBER] accounts/claims in [ASCII, MS EXCEL, OR MS ACCESS] format with [NUMBER OF TRANSACTIONS] transactions for Wheat Futures as well as the closing positions held for [ENTITY]'s proprietary accounts. Each transaction contains corresponding account information for which the claims are being filed.

The total number of Wheat Futures purchased or acquired [##.##] for the amount of [\$0.0000] and Wheat Futures sold [##.##] for the amount of [\$0.0000]¹ can be found on the enclosed [CD, DVD, OR FLASH DRIVE].

We, [ENTITY], attest that the data provided on the media attachment corresponds to [ENTITY]'s internal records.

I attest that the above information is true and correct.

Signature

Company Name

Job Title

Contact Information (including telephone number, fax number, and email address).

¹ Please list all other transactions, if applicable, including free receipts and free deliveries.



Appendix E

Column	Field Name	Max Length	WHEAT FUTURES FIELD DESCRIPTION
A	Account Number	40	Account number associated with the proprietary account for which transactions are being submitted with this Proof of Claim and Release.
B	Account Name	40	Name of individual, company, or entity associated with the account listed in Column A.
C	Full Name of the Beneficial Owner	40	Full name of the beneficial owner associated with the account listed in Column A.
D	TIN of the Beneficial Owner	9	Taxpayer identification number (TIN) for beneficial owner, no spaces and no dashes.
E	Beneficial Owner TIN Type (E/S/U/F)	1	E = Employer Identification Number (EIN); S = Social Security Number (SSN); U = Unknown; F = Foreign.
F	Care of:	40	Name of the entity to which correspondence should be mailed.
G	Attn:	40	Name of the person to whose attention correspondence should be mailed.
H	Street 1	40	Street Address 1 for fund distribution
I	Street 2	40	Street Address 2 for fund distribution
J	City	25	City for fund distribution
K	State	2	State for fund distribution
L	Zip Code	5	Zip code for fund distribution
M	Province	40	Province for fund distribution
N	Country	40	Country for fund distribution
O	Brokerage Firm	40	Name of Executing Broker
P	Account Number	15	Account Number of Brokerage Account
Q	Trade Date	10	(MM/DD/YYYY) MM = Month; DD = Day; YYYY = Year.
R	Contract Code	4	Contract Code
S	Contract Month	3	Month of Contract Expiration (Ex. MAY, JUN, JUL)
T	Contract Year (YYYY)	4	Year of Expiration
U	Transaction Type/Holdings	2	O = Opening position – Futures contracts held as of the opening of trading on February 1, 2015 P = Purchases made between February 1, 2015 through May 15, 2015, inclusive; FR = Free receipts made between February 1, 2015 through May 15, 2015, inclusive; S = Sales made between February 1, 2015 through May 15, 2015, inclusive; FD = Free deliveries made between February 1, 2015 through May 15, 2015, inclusive; C = Closing position – Futures contracts held at close of trading on May 15, 2015.
V	Number of contracts	19	Number of contracts associated with a transaction. No commas; use decimal point if needed. Up to four digits after decimal point.
W	Price	13	Average Price for O or C and Trade Price for P or S

***All eligible Wheat Futures Contracts for each contract for each account must balance. This means that the opening position plus total purchases, and free receipts during the Class Period plus any assigned options MUST EQUAL the total sales and free deliveries during the Class Period plus the closing position (O+P+FR=S+FD+C).**

*** You MUST include a cover letter with your electronic file that provides the total number of accounts; total number of transactions; total number of purchases and sales; and contact name(s) with phone number(s) and email address(es) in the event that we have any questions or require further information. See Appendix D for a sample cover letter. Any electronic files not in accordance with these Electronic Claims Filing Guidelines are subject to rejection.**

***Free Receipts and Free Deliveries are provided to balance your claim and will not result in a Recognized Loss under the Plan of Allocation. The original purchase and/or sale information relating to these shares must be provided in your original filing in order to be eligible under the Plan of Allocation. There will be no further attempt to collect transactional information regarding Free Receipts/Deliveries included in the filing.**

Appendix E

Column	Field Name	Max Length	WHEAT OPTIONS FIELD DESCRIPTION
A	Account Number	40	Account number associated with the proprietary account for which transactions are being submitted with this Proof of Claim and Release.
B	Account Name	40	Name of individual, company, or entity associated with the account listed in Column A.
C	Full Name of the Beneficial Owner	40	Full name of the beneficial owner associated with the account listed in Column A.
D	TIN of the Beneficial Owner	9	Taxpayer identification number (TIN) for beneficial owner, no spaces and no dashes.
E	Beneficial Owner TIN Type (E/S/U/F)	1	E = Employer Identification Number (EIN); S = Social Security Number (SSN); U = Unknown; F = Foreign.
F	Care of:	40	Name of the entity to which correspondence should be mailed.
G	Attn:	40	Name of the person to whose attention correspondence should be mailed.
H	Street 1	40	Street Address 1 for fund distribution
I	Street 2	40	Street Address 2 for fund distribution
J	City	25	City for fund distribution
K	State	2	State for fund distribution
L	Zip Code	5	Zip code for fund distribution
M	Province	40	Province for fund distribution
N	Country	40	Country for fund distribution
O	Brokerage Firm	40	Name of Executing Broker
P	Account Number	15	Account Number of Brokerage Account
Q	Trade Date	10	(MM/DD/YYYY) MM = Month; DD = Day; YYYY = Year.
R	Contract Code	4	Contract Code
S	PUT/CALL	10	Type of option
T	Contract Month	3	Month of Contract Expiration (Ex. MAY, JUN, JUL)
U	Contract Year (YYYY)	4	Year of Expiration
V	Strike Price	19	Strike price.
W	Transaction Type/Holdings	2	O = Opening position – Call/Put Options held as of the opening of trading on February 1, 2015 P = Purchases made between February 1, 2015 through May 15, 2015, inclusive; FR = Free receipts made between February 1, 2015 through May 15, 2015, inclusive; S = Sales made between February 1, 2015 through May 15, 2015, inclusive; FD = Free deliveries made between February 1, 2015 through May 15, 2015, inclusive; C = Closing position – Call/Put Options held at close of trading on May 15, 2015.
X	Number of Options contracts	19	Number of contracts associated with a transaction. No commas; use decimal point if needed. Up to four digits after decimal point.
Y	Option Price	19	Average Price for O or C and Transaction Price for P or S
Z	Disposition	19	Status of Option Contract. Assigned, Exercised, Expired, Closed
AA	Disposition Date (MM/DD/YYYY)	13	(MM/DD/YYYY) MM = Month; DD = Day; YYYY = Year.

***All eligible Wheat Futures Option Contracts for each contract for each account must balance. This means that the opening position plus total purchases, and free receipts during the Class Period plus any assigned options MUST EQUAL the total sales and free deliveries during the Class Period plus the closing position (O+P+FR=S+FD+C).**

*** You MUST include a cover letter with your electronic file that provides the total number of accounts; total number of transactions; total number of purchases and sales; and contact name(s) with phone number(s) and email address(es) in the event that we have any questions or require further information. See Appendix D for a sample cover letter. Any electronic files not in accordance with these Electronic Claims Filing Guidelines are subject to rejection.**

***Free Receipts and Free Deliveries are provided to balance your claim and will not result in a Recognized Loss under the Plan of Allocation. The original purchase and/or sale information relating to these shares must be provided in your original filing in order to be eligible under the Plan of Allocation. There will be no further attempt to collect transactional information regarding Free Receipts/Deliveries included in the filing.**