

STATE OF MINNESOTA
Department of Labor and Industry
Division of Labor Standards

**In the Matter of the Investigation of: R.D.
Offutt Farms Co. d/b/a R.D. Offutt Farms**

To: R.D. Offutt Farms Co. d/b/a
R.D. Offutt Farms
ATTN: Corporate Service Company
2780 Snelling Avenue N, Suite 101
Roseville, MN 55113

File No.: ICR-202500019

R.D. Offutt Farms Co. d/b/a
R.D. Offutt Farms
225 Broadway N
Fargo, ND 58102-4800

CONSENT ORDER

**NOTICE: THE ATTACHED EXHIBITS 1 AND 2 CONTAIN DATA CLASSIFIED AS
PRIVATE OR CONFIDENTIAL**

Nicole Blissenbach, Commissioner of the Minnesota Department of Labor and Industry (“Department”), and R.D. Offutt Farms Co. d/b/a R.D. Offutt Farms (“Employer”) agree that the Department’s investigation and findings against Employer as set forth in the Department’s letter dated July 28, 2025, may be resolved by this Consent Order as follows:

A. PARTIES

This Agreement applies to and is binding upon the following parties, collectively referred to herein as “the Parties”:

1. Nicole Blissenbach, in her official capacity as the Commissioner of the Minnesota Department of Labor and Industry (“Commissioner”), and the Minnesota Department of Labor and Industry (“Department”); and
2. R.D. Offutt Farms Co. d/b/a R.D. Offutt Farms, located at 225 Broadway North, Fargo, North Dakota 58102-4800 (“Employer”).

B. SCOPE OF CONSENT ORDER AND RELEASE

1. **Effective Date.** As used herein, Effective Date means the date this Consent Order is signed by Employer and the Commissioner or designee.
2. **Affected Employees.** As used herein, Affected Employees means those individuals listed on Exhibit 1 and Exhibit 2. Exhibit 1 and Exhibit 2 are specifically incorporated herein and made a part of this Consent Order.

3. **Release.** This Consent Order is made and entered into to resolve: (1) the Department's investigation of Employer for the Department's Audit Period of January 1, 2024 to December 31, 2024; and (2) the findings of the Department's investigation as set forth in the Department's letter to Employer dated July 28, 2025 ("Findings of Investigation"), including violations of the Affected Employee's rights under Minn. Stat. § 181.9447, subd. 10, and 181.86. The Parties agree to not subsequently litigate the Department's allegations asserted against Employer in the Findings of Investigation, the STIPULATED FACTS in Section C or the VIOLATIONS in Section D of this Consent Order. In consideration for Employer's obligations under this Consent Order, the Department shall release and discharge Employer from all claims, charges, or causes of action that the Department may have against Employer for violation of Minn. Stat. §§181.9445 – 181.9448 and Minn. Stat. §§ 181.85 – 181.91 in relation to the Affected Employees during the Audit Period.

4. **Claims Not Waived by the Commissioner; Other Remedies Reserved.** The Parties to this Consent Order acknowledge that by signing this Consent Order, the Commissioner or designee and the Department, do not release or waive the following: (a) any rights or claims arising outside of the Audit Period; (b) any rights or claims relating to Employer's employees other than the Affected Employees; and, (c) any right to bring an action for the purposes of enforcing this Consent Order pursuant to section G. The Parties further acknowledge that this Consent Order shall not limit or affect the authority of the Commissioner or the Department to conduct investigations and take actions regarding any matter within the scope of the Commissioner's or the Department's authority. Nothing in this Consent Order shall relieve Employer of the obligation to comply with all applicable state and federal laws and regulations.

5. **Scope of the Consent Order.** The terms of this Consent Order apply to Employer's facilities, business operations, and employees located or working in Minnesota. The terms of this Consent Order also apply to any facilities or business operations opened or acquired by Employer in Minnesota after the Effective Date of this Consent Order.

C. STIPULATED FACTS

1. The audit period for this investigation ran from January 1, 2024 to December 31, 2024 ("Audit Period").

2. Employer is an employer with at least one employee working in Minnesota during the Audit Period.

3. Employer's registered office address with the Office of the Minnesota Secretary of State is 2780 Snelling Avenue N, Suite 101, Roseville, MN, 55113. Employer's operating business address is 225 Broadway N, Fargo, ND, 58102-4800.

4. In January 2025, the Department initiated an investigation and audit of Employer's labor practices.

5. On January 30, 2025, the Department served a Demand for the Submission of Records (“Demand”) via mail upon Employer at its registered office address and operating business address.

6. Employer’s deadline to produce all responsive records was February 11, 2025.

7. Employer timely requested and received an extension from the Department, and subsequently submitted a response on February 25, 2025.

8. The Department mailed a deficiency letter to Employer on April 3, 2025, which identified the records Employer had not yet produced in response to the Demand. Employer was given a deadline of April 10, 2025, to submit the remaining records

9. Employer timely requested and received an extension from the Department, and subsequently provided records on April 10, April 16, April 22, and April 25, 2025.

10. Employer substantially complied with the Demand to the extent they could with the records they maintained.

11. On June 10, 2025, the Department provided Employer with information related to compliance with Minnesota employment laws, including Minnesota Earned Sick and Safe Time (Minn. Stat. §§ 177.50 and 181.9445 to 181.9448), migrant labor laws (Minn. Stat. §§ 181.85 to 181.89), and the Notice to Employee (Minn. Stat. § 181.032).

12. On July 28, 2025, the Department mailed Respondent a letter detailing the findings of its investigation, including three Statements of Back Wages detailing amounts owed to Affected Employees, comprised almost entirely of seasonal workers, for violations of Minnesota employment laws.

13. From August 7, 2025, to September 23, 2025, the Parties engaged in settlement discussions and were able to resolve this matter.

14. On September 23, 2025, the Parties entered into a consent order in this matter. The Parties subsequently determined a new Consent Order was necessary to amend the method of payment for the civil penalty amounts due to the Affected Employees. The Parties agree the prior consent order, dated September 23, 2025, is hereby vacated.

D. VIOLATIONS

Based upon the above STIPULATED FACTS, the parties agree the following violations of the law occurred:

1. Employer violated Minn. Stat. § 181.9447, subd. 10(b). Specifically, Employer failed to provide information, in writing or electronically, at the end of each pay period documenting earned sick and safe time (“ESST”) available and used during the pay period. Employer

maintains that ESST leave was available to all employees during the Audit Period but the Department concludes that Employer did not provide ESST to all its employees, and most employees were unable to utilize ESST during the Audit Period.

Minn. Stat. § 177.50, subd 7(a), states:

“If an employer does not provide earned sick and safe time pursuant to section 181.9446, or does not allow the use of earned sick and safe time pursuant to section 181.9447, the employer is liable to all employees who were not provided or not allowed to use earned sick and safe time for an amount equal to all earned sick and safe time that should have been provided or could have been used, plus an additional equal amount as liquidated damages.”

The Department, therefore, concludes that Employer owes 442 employees damages for the value of ESST that should have been provided and could have been used by these employees during the Audit Period.

2. Employer violated Minn. Stat. § 181.86, subd. 1, which requires an employer that recruits a migrant worker to provide the worker with a written employment statement at the time of recruitment. During the Audit Period, Employer, and/or its agents, recruited 101 migrant workers, none of whom were provided a written employment statement. Under Minn. Stat. § 181.89, subd. 2(2), Employer owes a penalty of \$800 for each migrant worker who was not provided with a written employment statement. These penalties are due to the migrant workers.

E. GROUNDS FOR CONSENT ORDER CONDITIONS

Employer agrees that the Commissioner is authorized to issue this Consent Order requiring it to (1) pay damages and civil penalties as specified under the CONDITIONS below and (2) comply with Minn. Stat. §§ 177.50 and 181.9445 to 181.9448 and 181.85 to 181.89.

F. CONDITIONS

Based upon the above sections, Employer agrees that the Commissioner should issue a Consent Order in accordance with the following terms:

1. **Compensatory Damages.** Employer agrees to pay the Affected Employees listed on Exhibit 1 compensatory damages for the value of earned sick and safe time that should have been provided to the Affected Employees in the amount of **\$82,769.45**.

2. **Civil Penalties.** Employer agrees to pay the Affected Employees listed on Exhibit 2 civil penalties in the amount of **\$80,800.00**. This amount equals \$800 per employee that did not receive a migrant worker's written employment statement as required by Minn. Stat. § 181.86, subd. 1.

3. **Method of Payment and Due Date:** Employer shall pay the damages and civil penalties described in Conditions 1 and 2 above to each current Affected Employee in the amounts specified in Exhibit 1 through its payroll system and Exhibit 2 through direct deposit or mailed check. Employer shall provide an earning statement for Exhibit 1 payments and 1099 for Exhibit 2 payments to each current Affected Employee. Employer shall provide checks for the damages and civil penalties described in Conditions 1 and 2 above to each former Affected Employees in the amounts specified in Exhibit 1 and Exhibit 2. Payments made for amounts listed in Exhibit 1 will be paid as wages by Employer and subject to applicable tax withholdings. Payments made for amounts listed in Exhibit 2 will not be paid as wages and not subject to tax withholdings. Employer will provide the following documentation as proof of payment to the Commissioner on or before **30 days following the Effective Date of this Consent Order** ("Due Date"):

- a. a sworn statement confirming all current Affected Employees in Exhibit 1 were paid through payroll and Exhibit 2 were paid through direct deposit or by mailed check;
- b. an individual check made payable to each former Affected Employee for the amount in Exhibit 1 and an individual check made payable to each former Affected Employee for the amount in Exhibit 2. The gross amount listed in Exhibit 1 will be subject to applicable FICA, Federal and State withholdings. The gross amount listed in Exhibit 2 will not be subject to withholdings;
- c. an earning statement for each current and former Affected Employee set forth in Exhibit 1 and a 1099 for each current and former Affected Employee set forth in Exhibit 2; and
- d. a last known address and phone number for each current and former Affected Employee.

4. Checks and documentation shall be mailed or delivered on or before 4:30 p.m. on the Due Date to:

Department of Labor and Industry
Division of Labor Standards
Attn: Siv Dobrovolny
443 Lafayette Road N.,
St. Paul, MN 55155

G. JUDICIAL RELIEF

The Parties agree that, upon the Effective Date, this Consent Order becomes a final order of the Commissioner, pursuant to Minn. Stat. § 177.27, subd. 4. If Employer fails to comply with

this Consent Order, the Commissioner may bring an action in District Court to enforce or require compliance with this Consent Order without further notice pursuant to Minn. Stat. § 177.27, subd. 5. Additionally, if Employer fails to comply with this Consent Order, pursuant to Minn. Stat. § 177.27, subd. 7, interest shall accrue on and be added to the unpaid balance from the date this Order is signed until it is paid at an annual rate computed in accordance with Minn. Stat. § 549.09.

H. WAIVER OF RIGHTS

For the purposes of this Consent Order, Employer waives all procedures and proceedings before the Commissioner, Court of Administrative Hearings, or District Court to which it may be entitled pursuant to the Minnesota and United States Constitutions, statutes, regulations, or rules, insofar as such procedures and proceedings relate to issues addressed in Sections C and D of this Consent Order. This includes waiver of the right to dispute the STIPULATED FACTS in section C above, the VIOLATIONS set forth in section D above, and/or the CONDITIONS set forth in section F above in a contested case proceeding pursuant to Minnesota Statutes, Ch. 14. Employer waives the right to any judicial review of the Consent Order by appeal, writ of certiorari, or otherwise.

I. ADDITIONAL ENFORCEMENT ACTION

This Consent Order pertains only to the facts specified herein and the Findings of Investigation and shall not in any way limit the initiation of an enforcement proceeding based upon unrelated or unknown facts or violations. This Consent Order may be used in the future against Employer to prove repeated violation(s) of Minn. Stat. §§ 181.9445 – 181.9448 and Minn. Stat. §§ 181.85 – 181.91. Pursuant to Minn. Stat. §177.27, subd. 7, a repeat or willful violator is subject to additional civil penalties of up to \$10,000.00 for each violation for each employee.

J. GENERAL TERMS

1. **Government Data.** Pursuant to the Minnesota Government Data Practices Act, this Consent Order (other than any attached exhibits) is classified as public data upon its issuance by the Commissioner. All data in the record shall maintain the data classification to which it is entitled pursuant to the Minnesota Government Data Practices Act, Minnesota Statutes, Ch. 13. The data shall not, to the extent it is not already public data, become public merely because it is referenced herein.

2. **Voluntary Agreement.** The Parties acknowledge that no person has exerted undue pressure on them to sign this Consent Order. Each party is voluntarily choosing to enter into this Consent Order. The Parties acknowledge that they have read and understood the terms of this Consent Order, that they have been represented by legal counsel and that they are voluntarily entering into this Consent Order to resolve the dispute among them.

3. **Severability.** The provisions of this Consent Order are severable, and should any provisions be declared by a court of competent jurisdiction to be unenforceable, the remaining provisions of this Consent Order remain in full force and effect.

4. **Prior Agreement.** The Parties acknowledge that the prior consent order between the Parties related to this matter, dated September 23, 2025, is vacated.

5. **Entire Agreement.** This Consent Order constitutes the entire agreement between the parties relating to: (1) the Department's investigation for the Audit Period; and (2) the findings of the Department's investigation as set forth in the Department's letter to Employer dated July 28, 2025. No party has relied upon any promises or representations that are not stated in this document. No changes to this Consent Order are valid unless they are in writing, identified as an amendment to this Consent Order, and signed by all parties. There are no inducements leading to the execution of this Consent Order except as herein explicitly contained.

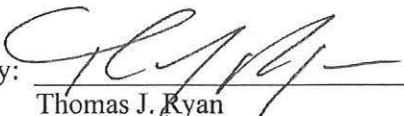
6. **Warranty.** The persons signing this Consent Order warrant that they have full authority to enter into this Consent Order on behalf of the party each represents, and that this Consent Order is valid and enforceable as to that party.

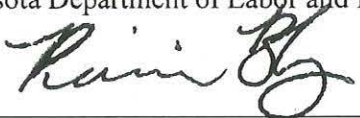
7. **Governing Law.** This Consent Order shall be construed and interpreted in accordance with the laws of the State of Minnesota.

8. **Counterparts.** This Consent Order may be executed in multiple counterparts, which shall be construed together as if one instrument. Any party is entitled to rely on an electronic or facsimile copy of a signature as if it were an original.

9. **Service.** A copy of this Consent Order shall be served by regular first-class mail and first-class certified mail upon Employer at the addresses listed above. The Consent Order shall be effective and deemed issued when it is signed on behalf of the Commissioner.

R.D. Offutt Farms Co. d/b/a R.D. Offutt Farms Minnesota Department of Labor and Industry

By: 
Thomas J. Ryan
Its President

By: 
Prairie Bly
Assistant Director,
Division of Labor Standards

Dated: 10/2/25

Dated: 10/2/25

Upon consideration of the forgoing Consent Order and based upon all the facts, records and proceedings herein, the Commissioner makes the following:

ORDER

NOW THEREFORE, IT IS HEREBY ORDERED that all terms of the Consent Order are approved and adopted.

Dated: 10/2/25

Nicole Blissenbach
Commissioner

By: 

Prairie Bly, Assistant Director
Division of Labor Standards
Minnesota Department of Labor and Industry

WH 9/2/25

EXHIBIT #1: Minn. Stat. § 181.9447, subd. 10(b)

STATEMENT OF BACK WAGES

NOTICE: THIS DOCUMENT CONTAINS DATA CLASSIFIED AS PRIVATE OR CONFIDENTIAL

Employer: R.D. Offutt Farms Co., dba R.D. Offutt Farms

Investigator: Siv Dobrovolny

Address: Attn: Tim Curoe/Sam Harvey, 225 Broadway N, P.O. Box 7160, Fargo, ND 58106

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
1							\$151.38				
2							\$202.47				
3							\$197.34				
4							\$108.85				
5							\$267.05				
6							\$189.54				
7							\$148.48				
8							\$182.56				
9							\$78.37				
10							\$94.14				
11							\$60.20				
12							\$143.10				
13							\$97.19				
14							\$294.83				
15							\$9.81				
16							\$216.98				
17							\$61.34				
18							\$170.13				
19							\$92.08				
20							\$138.78				
21							\$124.69				
22							\$339.56				
23							\$90.63				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
24							\$89.30				
25							\$84.17				
26							\$162.69				
27							\$268.40				
28							\$104.32				
29							\$190.40				
30							\$190.40				
31							\$113.23				
32							\$604.96				
33							\$61.60				
34							\$174.65				
35							\$107.13				
36							\$23.98				
37							\$190.75				
38							\$614.53				
39							\$81.20				
40							\$33.25				
41							\$153.75				
42							\$80.85				
43							\$119.00				
44							\$28.00				
45							\$585.14				
46							\$33.83				
47							\$167.04				
48							\$110.24				
49							\$209.44				
50							\$539.82				
51							\$177.42				
52							\$228.42				
53							\$177.10				
54							\$157.14				
55							\$111.48				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
56							\$220.83				
57							\$85.80				
58							\$128.21				
59							\$139.68				
60							\$330.23				
61							\$746.64				
62							\$142.46				
63							\$112.54				
64							\$134.30				
65							\$88.23				
66							\$110.78				
67							\$174.27				
68							\$276.19				
69							\$190.24				
70							\$218.30				
71							\$16.24				
72							\$188.32				
73							\$51.25				
74							\$130.05				
75							\$221.43				
76							\$227.80				
77							\$214.38				
78							\$218.58				
79							\$173.40				
80							\$373.43				
81							\$136.04				
82							\$118.72				
83							\$208.25				
84							\$348.02				
85							\$91.12				
86							\$64.98				
87							\$66.85				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
88							\$79.67				
89							\$170.72				
90							\$326.37				
91							\$119.97				
92							\$127.57				
93							\$147.60				
94							\$293.69				
95							\$200.25				
96							\$154.40				
97							\$294.03				
98							\$297.85				
99							\$87.32				
100							\$365.62				
101							\$189.92				
102							\$266.38				
103							\$215.28				
104							\$88.06				
105							\$92.52				
106							\$79.56				
107							\$100.35				
108							\$9.43				
109							\$184.97				
110							\$259.39				
111							\$153.65				
112							\$174.08				
113							\$471.96				
114							\$182.08				
115		do					\$195.20				
116							\$214.37				
117							\$549.82				
118							\$424.50				
119							\$130.50				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
120							\$166.58				
121							\$147.96				
122							\$43.38				
123							\$219.10				
124							\$430.88				
125							\$143.64				
126							\$363.97				
127							\$123.52				
128							\$220.83				
129							\$936.00				
130							\$378.09				
131							\$159.68				
132							\$101.15				
133							\$26.52				
134							\$253.70				
135							\$21.06				
136							\$119.18				
137							\$267.20				
138							\$172.64				
139							\$188.48				
140							\$220.32				
141							\$194.64				
142							\$174.24				
143							\$180.88				
144							\$141.52				
145							\$159.97				
146							\$82.96				
147							\$158.73				
148							\$182.88				
149							\$244.34				
150							\$178.71				
151							\$206.88				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
152							\$161.50				
153							\$385.54				
154							\$772.02				
155							\$198.39				
156							\$189.28				
157							\$129.33				
158							\$52.36				
159							\$343.98				
160							\$91.18				
161							\$25.20				
162							\$10.40				
163							\$93.28				
164							\$26.08				
165							\$654.30				
166							\$78.48				
167							\$169.05				
168							\$217.77				
169							\$169.88				
170							\$193.60				
171							\$133.98				
172							\$333.44				
173							\$122.10				
174							\$30.63				
175							\$18.90				
176							\$75.45				
177							\$141.90				
178							\$301.24				
179							\$93.60				
180							\$128.70				
181							\$172.20				
182							\$98.46				
183							\$190.88				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
184							\$170.82				
185							\$134.13				
186							\$126.36				
187							\$69.65				
188							\$70.20				
189							\$188.64				
190							\$134.61				
191							\$184.08				
192							\$348.60				
193							\$71.28				
194							\$184.20				
195							\$178.98				
196							\$15.66				
197							\$325.85				
198							\$164.34				
199							\$448.26				
200							\$144.90				
201							\$138.89				
202							\$522.54				
203							\$120.23				
204							\$4.32				
205							\$144.20				
206							\$347.06				
207							\$211.04				
208							\$194.82				
209							\$82.53				
210							\$9.10				
211							\$162.18				
212							\$176.94				
213							\$159.66				
214							\$174.48				
215							\$117.00				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
216							\$16.24				
217							\$91.18				
218							\$146.37				
219							\$102.85				
220							\$181.22				
221							\$188.80				
222							\$188.16				
223							\$52.80				
224							\$138.08				
225							\$99.11				
226							\$150.96				
227							\$142.20				
228							\$467.94				
229							\$705.16				
230							\$22.04				
231							\$22.04				
232							\$185.60				
233							\$181.56				
234							\$131.92				
235							\$186.15				
236							\$94.35				
237							\$200.34				
238							\$92.48				
239							\$200.70				
240							\$106.76				
241							\$204.25				
242							\$80.75				
243							\$106.76				
244							\$218.09				
245							\$94.18				
246							\$347.88				
247							\$101.32				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
248							\$77.18				
249							\$103.08				
250							\$189.28				
251							\$186.66				
252							\$86.63				
253							\$511.71				
254							\$394.69				
255							\$201.28				
256							\$200.96				
257							\$190.08				
258							\$315.84				
259							\$131.04				
260							\$173.52				
261							\$146.88				
262							\$94.52				
263							\$154.26				
264							\$76.48				
265							\$100.98				
266							\$220.47				
267							\$90.65				
268							\$97.09				
269							\$284.89				
270							\$276.93				
271							\$134.72				
272							\$45.50				
273							\$136.98				
274							\$170.98				
275							\$44.10				
276							\$28.62				
277							\$550.18				
278							\$184.86				
279							\$79.92				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
280							\$134.46				
281							\$67.20				
282							\$16.24				
283							\$342.44				
284							\$170.46				
285							\$57.63				
286							\$206.10				
287							\$150.78				
288							\$100.32				
289							\$47.09				
290							\$157.33				
291							\$49.60				
292							\$193.03				
293							\$273.60				
294							\$135.45				
295							\$121.53				
296							\$171.84				
297							\$131.77				
298							\$358.87				
299							\$340.79				
300							\$130.90				
301							\$14.18				
302							\$394.63				
303							\$57.97				
304							\$170.82				
305							\$210.52				
306							\$282.21				
307							\$91.63				
308							\$108.46				
309							\$214.37				
310							\$211.65				
311							\$143.93				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
312							\$161.53				
313							\$77.35				
314							\$113.26				
315							\$103.79				
316							\$136.96				
317							\$192.09				
318							\$146.68				
319							\$208.96				
320							\$239.58				
321							\$187.17				
322							\$209.28				
323							\$198.88				
324							\$130.03				
325							\$211.46				
326							\$351.01				
327							\$47.43				
328							\$276.07				
329							\$221.22				
330							\$100.64				
331							\$209.39				
332							\$199.52				
333							\$82.11				
334							\$63.58				
335							\$214.20				
336							\$158.55				
337							\$200.32				
338							\$513.39				
339							\$34.85				
340							\$189.38				
341							\$241.38				
342							\$214.71				
343							\$141.30				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
344							\$714.34				
345							\$200.26				
346							\$219.13				
347							\$21.54				
348							\$81.58				
349							\$188.48				
350							\$207.55				
351							\$167.04				
352							\$576.99				
353							\$412.18				
354							\$290.60				
355							\$33.25				
356							\$228.09				
357							\$143.65				
358							\$25.92				
359							\$116.66				
360							\$220.86				
361							\$101.49				
362							\$93.16				
363							\$104.89				
364							\$65.29				
365							\$98.56				
366							\$210.18				
367							\$16.15				
368							\$116.55				
369							\$169.75				
370							\$104.65				
371							\$221.40				
372							\$126.35				
373							\$559.82				
374							\$426.24				
375							\$603.33				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
376							\$617.37				
377							\$593.13				
378							\$582.33				
379							\$525.92				
380							\$537.23				
381							\$426.48				
382							\$301.50				
383							\$187.15				
384							\$114.98				
385							\$320.80				
386							\$105.83				
387							\$120.44				
388							\$111.65				
389							\$327.05				
390							\$128.25				
391							\$43.58				
392							\$431.04				
393							\$130.43				
394							\$91.98				
395							\$122.72				
396							\$209.40				
397							\$132.66				
398							\$136.00				
399							\$106.43				
400							\$173.43				
401							\$376.86				
402							\$177.39				
403							\$179.10				
404							\$188.37				
405							\$609.76				
406							\$192.32				
407							\$94.86				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
408							\$103.02				
409							\$142.20				
410							\$169.76				
411							\$199.52				
412							\$226.61				
413							\$73.85				
414							\$146.56				
415							\$257.07				
416							\$186.72				
417							\$430.88				
418							\$134.40				
419							\$17.49				
420							\$34.17				
421							\$162.18				
422							\$793.60				
423							\$130.65				
424							\$183.75				
425							\$125.55				
426							\$168.91				
427							\$289.90				
428							\$150.15				
429							\$74.16				
430							\$149.48				
431							\$142.80				
432							\$63.75				
433							\$177.39				
434							\$128.34				
435							\$55.25				
436							\$95.76				
437							\$80.64				
438							\$81.32				
439							\$121.22				

EE #	Name	Address	City	State	Zip	SSN	Gross	FICA	Federal	State	Net
440							\$93.42				
441							\$92.08				
442							\$95.71				
TOTALS							\$82,769.45				

STATEMENT OF BACK WAGES

NOTICE: THIS DOCUMENT CONTAINS DATA CLASSIFIED AS PRIVATE OR CONFIDENTIAL

File Number: ICR-202500019

Employer: R.D. Offutt Farms Co., dba R.D. Offutt Farms

Investigator: Siv Dobrovolny

Address: Attn: Tim Curoe/Sam Harvey, 225 Broadway N, P.O. Box 7160, Fargo, ND 58106

EE#	LAST NAME	FIRST NAME	ADDRESS	CITY	STATE	ZIP	SSN	AMOUNT
1								\$800
2								\$800
3								\$800
4								\$800
5								\$800
6								\$800
7								\$800
8								\$800
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92						\$800
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94						\$800
95						\$800
96						\$800
97						\$800
98						\$800
99						\$800
100						\$800
101						\$800

TOTAL \$80,800