FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	pe Response		•							5 D 1 d	1: 00		() . T	
	nd Address of ON CURT	f Reporting Per IS A	rson —	2. Issuer Name a					CS]	_X_ Direc	tor	eck all appli	cable) 10% Owner	
PO BOX	777, S M	(First) AIN ST	(Middle)	3. Date of Earlies 08/11/2015	t Transacti	on (M	onth/Day	/Year)		Office	er (give title belo	ow)	Other (specify	below)
		(Street)		4. If Amendment,	Date Orig	inal Fi	iled(Month	/Day/Year)		_X_ Form fil	ual or Joint/0 led by One Repo ed by More than	orting Person		able Line)
HECTO	R, MN 553	342								Form the	ed by More man	One Reporting	reison	
(City	·)	(State)	(Zip)	T	able I - No	n-Der	rivative S	Securities	Acqu	ired, Disp	osed of, or I	Beneficially	Owned	
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	(Instr. 8)		(A) or I	rities Acq Disposed (3, 4 and 5)	of (D)	Beneficia Reported	nt of Securiti lly Owned F Transaction	ollowing	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
				(Month/Day/Year	Code	V	Amoun	(A) or (D)	Price	(Instr. 3 a	na 4)		or Indirect (I) (Instr. 4)	
Common	n Stock									405,000)		I	By Trust
Common	n Stock									26,114			I	By Spouse
Common	Stock		04/10/2015		G	V	2,650	D	\$ 0	578,689)		D	
Common	Stock		07/15/2015		G	V	11,930	D D	\$ 0	570,799			D	
Common	Stock		08/11/2015		P		298	A	\$ 10	571,097	1		D	
Reminder:	Report on a s	separate line fo	r each class of secur	•		Pers cont the t	sons wh tained ir form dis	o respon n this for splays a	rm are curre	not requesting ntly valid	ction of inf uired to res OMB conf	spond unle	ess	2 1474 (9-02)
				Derivative Securit e.g., puts, calls, w						ily Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/\footnote{\text{Month/Day/}\footnote{\text{V}}	Execution Da Year) any		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and (Mo	Pate Exerc Expiration on the Day	on Date	Ame Und Seco	itle and ount of lerlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owner Form of Derivat Securit Direct or India	f Beneficia Ownersh y: (Instr. 4)
				Code V	(A) (D)	Date Exer	e rcisable	Expiration Date	n Title	Amount or Number of Shares				

Reporting Owners

D (1 0 V)		Relationsh	nips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
SAMPSON CURTIS A PO BOX 777 S MAIN ST HECTOR, MN 55342	X			

Signatures

Suzette McNally, Attorney-in-Fact for Curtis A. Sampson	08/13/2015	5	5	5	,																						Ì									l	5	,	,			5	5	5	,	,		,	,	,	,		,	;	5	;	;	,		,	;	5	5	5	;	5	5	5	5	5	5	,		,	,		,		5	5	5	,	,	5	5	5	5	,			,	5	5	5	,	5	5	5	5	,	,	5	5	,	,			,	;	;	,					,	,	,	,	į	5	5	5	5	5	5	5	;	į	į	į	;	5
**Signature of Reporting Person	Date					 Ì	Ī	ı	Ī	Ì	Ī	ĺ	Ī	ı	Ì	Ì	Ī	ı	Ì	Ī	Ī	_	Ī	Ī	Ī	Ī	Ī				Ī	Ì	Ì	Ī	Ī	Ī	Ī			_	Ī	Ī					_		_			_	Ī	Ī	Ī		Ī		_	Ī		Ī	Ī	Ī	Ī	Ī	Ī						_	Ī	Ī	_	Ī	_											_	_																_	_		Ī	Ī		_	 _	Ī	Ī			Ī	Ī	Ī	Ī			Ī	Ī	Ī	Ī	Ī	Ī	Ī	Ī	Ī	Ī

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.