

**FORWARD PRICING ELECTION FORM  
DAKOTA ETHANOL, L.L.C.**

ELECTION PERIOD
I elect to receive payment under the Forward Pricing Program for corn to be delivered to Dakota Ethanol by me as required by my Member Agreement with Lake Area Corn Processors. This election is effective for the trimester beginning on (check only one): <b>January 1, 20_____ May 1, 20_____ September 1, 20_____ Opt out for all subsequent trimesters_____</b>
THIS FORWARD PRICING ELECTION MUST BE RECEIVED BY DAKOTA ETHANOL AT LEAST 30 DAYS PRIOR TO THE BEGINNING OF THE TRIMESTER.

MEMBER(S) INFORMATION		
Name(s) _____	Member(s) Equity Share Certificate Number: _____	Telephone Numbers Home: Work: Cell: Fax:
Street or P.O. Box _____	City, State and ZIP Code _____	

WARRANTIES AND REPRESENTATIONS
<ol style="list-style-type: none"> <li>1. I desire to make the above-described pricing election for the purpose of determining the price of corn I will deliver to Dakota Ethanol in the trimester specified above, providing such notice is received at least 30 days prior to the beginning of the trimester</li> <li>2. I must price the corn at a price offered by Dakota Ethanol no later than the Friday preceding the scheduled week of delivery. If I do not price the corn within the time specified, the price paid will be that offered by Dakota Ethanol on the following Monday at 10:00 am (non-holiday, Monday through Friday) or the first business day thereafter that the Chicago Board of Trade is open.</li> <li>3. I acknowledge that an approved South Dakota grain contract will be delivered to me within thirty (30) days after I price the corn. I agree to execute such contract and promptly return it to Dakota Ethanol.</li> <li>4. I acknowledge that Dakota Ethanol will make separate payments for all corn deliveries as they are delivered. (Each payment will include an allowance for freight, as determined by rates provided in Exhibit B to the Member Control Agreement</li> <li>5. I acknowledge that this pricing election is binding and may not be withdrawn at any time throughout the trimester specified above.</li> <li>6. I acknowledge that this document will be governed by the rules of the Articles of Organization, Operating Agreement, Member Control Agreement and policies of Dakota Ethanol and Lake Area Corn Processors.</li> </ol>

DELIVERY INSTRUCTIONS	
By Mail: Dakota Ethanol, L.L.C. Post Office Box 100 Wentworth, South Dakota 57075	By Personal Delivery: Dakota Ethanol, L.L.C. 46269 South Dakota Highway 34 Wentworth, South Dakota 57075

SIGNATURE(S) OF MEMBER(S)	
_____ Signature of Member	_____ Date
_____ Signature of Member	_____ Date

OFFICE USE ONLY	
<b>RECEIVED BY DAKOTA ETHANOL, L.L.C. on this _____ DAY of _____, 20_____.</b>  By _____  Its _____	<b>Price elected by Member(s) or set by Dakota Ethanol:</b> \$ _____ per bushel of corn.  <b>Price offered by Dakota Ethanol on:</b> _____, 20_____.