

<p><b>U.S. DEPARTMENT OF AGRICULTURE</b>  <b>AGRICULTURAL MARKETING SERVICE</b>  <b>SPECIALTY CROPS PROGRAM</b></p>	<p><b>APPLICATION TO THE</b>  <b>AVOCADO</b>  <b>ADMINISTRATIVE</b>  <b>COMMITTEE FOR</b>  <b>PRODUCERS EXEMPTION</b>  <b>CERTIFICATE</b></p>	<p>Avocado Administrative Committee                  P.O Box 900188                  Homestead, FL 33090-0848                  Tel: (305) 247-0848</p>			
DATE	NUMBER OF FRUIT IN SAMPLE				
PRODUCER'S NAME		TEL. NUMBER (include area code)			
MAILING ADDRESS (City, County, State, and Zip Code)		EMAIL ADDRESS			
LOCATION OF GROVE (from established landmarks)					
VARIETY FOR WHICH EXEMPTION IS REQUESTED <input type="checkbox"/> Details <input type="checkbox"/> Current Regulation <input type="checkbox"/> Requested Exemption					
SHIPPING DATE	WEIGHT	SIZE			
HANDLER'S NAME					
PRODUCER'S REASON FOR REQUESTING THIS EXEMPTION (If additional space is required, use back)					
ESTIMATED QUANTITY OF AVOCADOS FOR WHICH EXEMPTION IS REQUESTED					
<b>CERTIFICATION OF STATEMENT:</b> I (we) hereby agree to comply with all of the requirements of the Marketing Order regulating the handling of avocados grown in the Florida production area and with all the rules and regulations issued thereunder.					
SIGNATURE OF APPLICANT		DATE			
<b>DO NOT WRITE BELOW THIS LINE</b>					
COMMITTEE ACTION					
MATURITY SUBCOMMITTEE	YES	NO	AVOCADO ADMINISTRATIVE COMMITTEE	YES	NO

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