TEXAS VALLEY CITRUS COMMITTEE 901 BUSINESS PARK DRIVE SUITE 500 MISSION, TEXAS 78572

Offc: (956) 581-2190/ Fax: (956) 581-3912

Certificate of Privilege #_____

I, THE UNDERSIGNED, HEREBY CERTIFY TO THE SECRETARY OF AGRICULTURE AND TO THE TEXAS VALLEY CITRUS COMMITTEE THAT I HAVE READ, FULLY UNDERSTAND, AND WILL COMPLY WITH THE FOREGOING RULES WHICH GOVERN THE HANDLING OF CITRUS FOR PROCESSING OR FOR MANUFACTURING FOR CONVERSION INTO SPECIFIED BY-PRODUCTS, RELIEF OR CHARITY. I FURTHER UNDERSTAND THAT NONCOMPLIANCE IS A VIOLATION OF THE AGRICULTURAL MARKETING AGREEMENT ACT, AND IS SUBJECT TO A FINE OF UP TO \$1,100 FOR EACH VIOLATION.

By:(Print Name)		
(Print Name)	(Signature)	(Date
Firm:	Title:	
Address:(M		
(M	ailing Address, City, State, and Zip Code)	
Physical Address:		
	(If different than mailing address)	
Phone:	Fax:	
Person in charge of Special Purpose	e forms:	
PURPOSE OF SHIPMENTS: Proces Check applicable box(es)	osing Relief or Charity Otherwise Diverted	
Where will shipments originate?		
List Names and Addresses of Consi	gnees below:	
APPROVED BY:		
The following statements are made in accordance with t	he Privacy Act of 1974 (511 S.C. 552a) and the Panenwork Red	luction Act of 10

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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0189. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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