

**EXPORT PROGRAM APPLICATION FOR CASH BACK
RAISIN ADMINISTRATIVE COMMITTEE
P.O. Box 5217
Fresno, CA 93755-5217**

The undersigned Packer hereby requests a cash adjustment payment from the RAISIN ADMINISTRATIVE COMMITTEE for the raisins exported pursuant to this application. It is understood that upon submission of all required documents by the packer, the Raisin Administrative Committee will pay the cash adjustment applicable to the raisins exported pursuant to the Export Replacement Offer in effect as of the date of shipment. This application is subject to all provisions as set forth in the applicable EXPORT REPLACEMENT OFFER as approved by the RAISIN ADMINISTRATIVE COMMITTEE and the SECRETARY.

VARIETAL TYPE: NATURALS

Pack Style	# Per Case	No. Cases	Packed Weight
TOTAL PACKED WEIGHT			

NATURAL CONDITION WEIGHT
SHRINKAGE ALLOWANCE
TOTAL PACKED WEIGHT ÷ LBS.

CASH BACK REQUESTED :
COUNTRY CASH BACK RATE: _____/LB **\$** _____

COUNTRY: _____

EXPORT / IMPORTER: _____

SHIPMENT DATE/RAC 21 MONTH & REPORT NUMBER _____

PACKER REFERENCE NO./USDA CERTIFICATE NUMBER OR MEMO REPORT OF INSPECTION NUMBER _____

(Must agree with Reference No. on Truck & Ocean Bills of Lading)

The making of any false statement or representations in any matter within the jurisdiction of any agency of the United States, knowing it to be false, is a violation of Title 18, Section 1001, United States Code, which provides for a penalty of a fine of \$10,000 or imprisonment of not more than five years, or both.

PACKER: _____ **By:** _____ **Date:** _____

FOR RAC use only:	DATE:	Check No.
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