U. S DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE

## SANITARY CERTIFICATE REQUEST-ALGERIA

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. This valid OMB control number for this collection is 0581-NEW. The time required to complete this information collection is estimated to average 12 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 information.

I acknowledge th	at by checking	g this box that the	e information p	rovided is factua	al and a	ccurate.				
1. CONTACT NAME			, ,	MAIL CERTIFICATE TO:						
2. CUSTOMER NUMBER					7. COMPANY					
3. BILLING REFERENCE					T					
4. E-MAIL ADDRESS										
5. CONTACT PHONE										
6. FAX				11. STATE		12. ZIP				
A. IDENTIFICATION OF DAIRY PRODUCTS										
13. DESCRIPTION OF COMMODITY										
14. NUMBER OF P	UNITS	0								
15. NET WEIGHT		lbs								
16. GROSS WEIGH										
17. LOT NUMBER										
18. LOT CODE		. QUANITY GS/CARTONS)		20. NET WEIGHT		PRODUCTION DATE	22. EXPIRY DATE			
B. MANUFACTURER										
23. PLANT NUMBER ; ;										
24. DATE OF PRO										
C. ORIGIN		<u>'</u>								
COUNTRY OF ORIGIN UNITED ST			TATES OF A	MERICA						
D. EXPORTE	ER									
25. NAME										
26. ADDRESS										
E. PRODUCI	ER									
27. NAME										
28. ADDRESS										
F. DESTINA										
29. PLACE OF LOA		Y, STATE								
30. DESTINATION CITY										
G. IMPORTER										
31. NAME										
32. ADDRESS										
33. SHIP NAMEAND VOYAGE NUMBER 34. SIGNATURE OF AGENT FOR APPLICANT 35. DATE										
34. SIGNATURE O	PF AGENT F	OR APPLICAN	11	35. DATE						

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