ALMOND BOARD OF CALIFORNIA

1150 9th Street, Suite 1500

Modesto, CA 95354

Tel: (209) 549-8262 Fax: (209) 550-5494

**ACCEPTED USER BUSINESS DATA SHEET**

Name:

Mailing Address:

Street Address:

Facility Location:

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN or EIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Business/Organization Type:** Years in Business: \_\_\_\_\_\_\_\_\_\_

□ Sole Proprietor

□ Partnership

□ Corporation

Names and Titles of Principals (Persons owning/managing the business):

**Check box that applies to Principals:**

Almond Grower: □ Yes □ No Handler: □ Yes □ No

If growers, please provide number of acres and location of orchards

Bank Reference

The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the information to be supplied on this form is the Agricultural Marketing Agreement Act of 1937, Secs. 1-19, 48 Stat. 31, as amended, (7 U.S.C. 601-674). Furnishing the requested information is necessary for the administration of the marketing order program. Submission of the Tax Identification Number (TIN) is mandatory, and will be used to validate ballots and determine affiliation or entity identity. Please note that ballots will not become invalid if a TIN is not disclosed.

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