



Area II Colorado Potato Administrative Committee

Certificate of Privilege

Certificate No. \_\_\_\_\_

Date \_\_\_\_\_

San Luis Valley
Office - Area II
(719) 852-4684 FAX
lweyers@coloradopotato.org

P.O. Box 348
1305 Park Avenue
Monte Vista CO 81144
(719) 852-3322

This Certificate of Privilege is granted for \_\_\_\_\_ hundredweight of potatoes to be used for the sole purpose of \_\_\_\_\_.

Permission is hereby granted to:
Shipper Name \_\_\_\_\_
Address \_\_\_\_\_
City, State, and Zip Code \_\_\_\_\_

to ship or handle potatoes in the above listed amount and for the above stated purpose.

The potatoes governed by this Certificate shall be delivered on or before \_\_\_\_\_, 20\_\_\_\_, at which time this Certificate shall become null and void.

Date Shipped: \_\_\_\_\_

This Certificate is issued pursuant to the application of said grantee as stated above and whose said application states the legal receiver will be:

Receiver Name \_\_\_\_\_
Address \_\_\_\_\_
City, State, and Zip Code \_\_\_\_\_

Permission is hereby granted by authority of the Colorado Potato Administrative Committee, Area II (Committee). Telephone (719) 852-3322 / FAX (719) 852-4684.

Date of Issue: \_\_\_\_\_

Committee Manager

The undersigned recipient of the potatoes governed by this Certificate does understand and agree that all potatoes granted special privilege by the authorization of this Certificate shall be handled in such prescribed manner and for such prescribed purpose as contained in this Certificate. The Certificate must accompany the shipment and the undersigned agrees to the provisions and stipulations of this Certificate and further agrees to receive, sign and return one copy of said Certificate to the Committee, P.O. Box 348, Monte Vista, CO 81144, immediately upon receipt of said potatoes. False certification, knowing it to be false, is a violation of title 18, section 1001, of the United States Code, among other statutes, which provide for a fine, imprisonment, or both.

Shipper Signature: \_\_\_\_\_
Receiver Signature: \_\_\_\_\_
Receiving Company: \_\_\_\_\_
Date Received: \_\_\_\_\_

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