## FAR WEST SPEARMINT OIL ADMINISTRATIVE COMMITTEE 6601 W. Deschutes Ave., Suite C-2 Kennewick, WA 99336 Phone: (509) 585-5460 or Fax: (509) 585-2671

## ALLOTMENT BASE TRANSFER FORM

Pursuant to section 985.59 of Marketing Order No. 985

1.	Producer TRANSFERRING BASE:				
	Grower's Name		Grower's No.		
	TRANSFEROR desires to remain on Committee Mailin	0	$\Box$ No		
2.	roducer ACQUIRING BASE:				
	Producer ACQUIRING BASE: Grower's Name			Grower's No.	
3.	Quantity being transferred: Pounds of Na	(Circle One)			
4.	Effective date of transfer:			cate 1 or 3)	
5.	Crop year when transfer to become effective:				
6.	Signature of Producer TRANSFERRING Base: I certify that the above amounts, class, and dates are correct//				
7.	Signature of Producer ACQUIRING Base: I certify that the above amounts, class, and dates are correct and that I have the land and the equipment necessary to produce the oil to meet the bona fide effort requirement associated with this base.				
		/	/		
		/	/		
8.	Signature of Committee agent executing transfer:	/	/		
9.	Signature of Manager:	/	/		
	T Allotment Base Prior to Transfer	ransferring	I	Acquiring	
	Quantity Transferred -		H	+	
	Allotment Base after Transfer				

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 0581-0178. The time required to complete this information collection is estimated to average 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.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint\_filing\_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1)

mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: <u>program.intake@usda.gov</u>. USDA is an equal opportunity provider, employer, and lender.