Telephone: (956) 581-2190

TEXAS VALLEY CITRUS COMMITTEE 901 Business Park Drive, Suite 400 Mission, Texas 78572

e 400	Fax: (956) 584-3307

I, the undersigned, hereby certify to the Committee that I have read, fully under nandling of citrus for processing or for charity. I further understand that noncoact, and is subject to a fine of up to \$3.	stand, and will comply with manufacturing for conversion ompliance is a violation of the	, the foregoing rules to on into specified by-pr	hat govern the roducts, relief or
By:Name (please print)	Signature		Date
Name (piease primi)	Signature		Date
Firm Name:	Ti	itle:	
Address: Mailing Address, City, State, a Physical Address (if different than mail	•		
Phone:	Fax:		
Person in charge of Special Purpose for	rms:		
Purpose of Shipments: Processing	☐ Relief/Charity ☐ (check applicable boxes)	Otherwise Diverted _	
Where will shipments originate?		· · · · · · · · · · · · · · · · · · ·	
List Names and Addresses of Consigne	es below:		
APPROVED BY:		DATE:	

CERTIFICATE OF PRIVILEGE NO.

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