



Non-Criteria Agricultural Clearance Order
 Form ETA-790B Addendum A
 U.S. Department of Labor

Additional Crop or Agricultural Activities and Wage Offer Information

Crop or Agricultural Activity	Wage Offer/Per	Work State	Piece Rate Offer	Piece Rate Units / Estimated Hourly Rate / Special Pay Information
	\$ ____ . ____ <input type="checkbox"/> HOUR <input type="checkbox"/> MONTH		\$ ____ . ____	
	\$ ____ . ____ <input type="checkbox"/> HOUR <input type="checkbox"/> MONTH		\$ ____ . ____	
	\$ ____ . ____ <input type="checkbox"/> HOUR <input type="checkbox"/> MONTH		\$ ____ . ____	
	\$ ____ . ____ <input type="checkbox"/> HOUR <input type="checkbox"/> MONTH		\$ ____ . ____	
	\$ ____ . ____ <input type="checkbox"/> HOUR <input type="checkbox"/> MONTH		\$ ____ . ____	



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Additional Crop or Agricultural Activities and Wage Offer Information Continued

Crop or Agricultural Activity	Wage Offer/Per	Work State	Piece Rate Offer	Piece Rate Units / Estimated Hourly Rate / Special Pay Information

For Public Burden Statement, see the Instructions for Form ETA-790B.