

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 Mailing List: ☐ Yes ☐ No
2. **Producer ACQUIRING BASE:** _____

Grower's Name
Grower's No.
3. Quantity being transferred: _____ Pounds of **Native** or **Scotch** Class _____

(Circle One)
(Indicate 1 or 3)
4. Effective date of transfer: _____
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: ____/____/____

	Transferring	Acquiring
Allotment Base Prior to Transfer		
Quantity Transferred	- _____	+ _____

Allotment Base after Transfer

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