

**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: \_\_\_\_/\_\_\_\_/\_\_\_\_

|                                      | <b>Transferring</b> | <b>Acquiring</b> |
|--------------------------------------|---------------------|------------------|
| Allotment Base Prior to Transfer     |                     |                  |
| Quantity Transferred                 | - _____             | + _____          |
| <b>Allotment Base after Transfer</b> |                     |                  |

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