U.S. DEPARTMENT OF AGRICULTURE

GROWER

Avocado Administrative Committee P O Box 900188

AGRICULTURAL MARKETING SERVICE FRUIT AND VEGETABLE PROGRAM		REGISTRATION		Homestead, FL 33090-0848 Tel: (305) 247-0848	
DATE	ATE DISTRICT*				
The making of any false statements or representations in any matter within the jurisdiction of any agency of the United States, knowing it to be false, is a violation of Title 18, Section 1001 of the U.S. Code, which provides for a penalty or a fine or imprisonment, or both.					
1. NAME**			TEL. NO. (include area code)		
MAILING ADDRESS (City, County, State, and Zip Code)					
2. NAME**			TEL. NO	. (include area code)	
MAILING ADDRESS (City, County, State, and Zip Code)					
LOCATION OF GROVE (Legal)					
CERTIFICATION STATEMENT : I hereby certify that I have a proprietary interest in a commercial avocado grove containing not less than ten (10) fruit-bearing avocado trees, and that I am authorized to act at election meetings for any and all other persons with interest in such grove.					
1. SIGNATURE				DATE	
2. SIGNATURE				DATE	
REGISTRATION NUMBER:					
*District: 1 means Dade County; 2 means all counties south of the Production area boundaries except Dade. **Name: Each legal entity will need to make available legal documents that substantiate that it is a corporation, partnership, or lessee.					

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