

Arizona Department of Agriculture Federal Organic Certification Cost Share Application

To be eligible for reimbursement the operation must have received organic certification on or between October 1, 2018, and September 30, 2019. The amount of reimbursement is 75% of certification costs (maximum of \$750)

PRODUCER/HANDLER IDENTIFICATION

First Name and/or Company Name		M.I.	Last Name	
Address				
Address				
City	County	State	Zip Code	
City	County	State	Zip code	
Phone Number	Fax Number		Email Address (Required)	
Organic Certification Number	Social Security Number or Employer Identification Number (EIN)			
	CERTIFICATION IN			
Name of Certification Agent		Organic	Certification Number	
Janua Data of Contification	Application Foo Daid		Annual Fee Paid	
Issue Date of Certification	Application Fee Paid		Annual Fee Paid	
Total Amount of Fees Paid for Certifica	tion: Date Fees Billed		Date Fees Paid	
Total Amount of rees raid for eer timed	don. Date rees billed		Dute rees raid	
NOTE: You must attach a co	py of your certification, b	illing, and proo	f of payment to your appli	cation.
	•			
	SIGNAT	URE		
Certification by Producer:				
I certify that the above information is t		operation stated	l above received organic ce	ertification on or
between October 1, 2018, and Septem	ber 30, 2019.			
Notice of Develtice, Develty for Impuri	nali, malijna falsa statom	anta au falaa au		
Notice of Penalties: Penalty for knowi through fraudulent means, may include			·	-
under applicable federal and state law		ion and/or form	eiture or agriculture assist	ance funds
under applicable rederar and state law				
Dat				
Certified Operations Signature			Month / Day / Year	
Email OR Mail Application and Supporting Documents To:	For Official Use Only			
rnick@azda.gov	Application Number	Reimbur	sable Costs From Invoice	
Arizona Department of Agriculture				
Citrus, Fruit and Vegetable	□75% =	\$	□ \$750	
Cost Share Reimbursement	Approved By Date			
1688 West Adams Street				