Arizona Organic Program Rev. 07/2024



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, 2023, and September 30, 2024. The amount of reimbursement is 75% of certification costs (maximum of \$750)

PRODUCER/HANDLER IDENTIFICATION

| First Name and/or Company Name | | | | M.I. | La | st Name | |
|--|---------------|-----------------------|--|---------------|---------------------------------|-------------------------|-----------|
| | | | | | | | |
| Address | | | | | | | |
| Cit. | | | | <u> </u> | ٦. | 0 1 | |
| City | | | County | State | Zış | Zip Code | |
| Dharra Nivesharr | | | Face Neurals au | | Г., | anil Addunas (Daniisad) | |
| Phone Number Cell Phone Number | | | Fax Number En | | Email Address (Required) | | |
| Organic Cortification Number | | | Social Security Number or Employer Identification Number (EIN) | | | | or (EINI) |
| Organic Certification Number | | | Social Security Number of Employer Identification Number (EIN) | | | | |
| | | | | | | | |
| CERTIFICATION INFORMATION | | | | | | | |
| Name of Certification Agent Organic Certification Number | | | | | | | |
| | | | | | | | |
| Issue Date of Certification | | | olication Fee Paid | | Annual Fee Paid | | |
| | | | | | | | |
| | | | | | | | |
| Total Amount of Fees Paid for Certification: Da | | | e Fees Billed | | | Date Fees Paid | |
| | | | | | | | |
| NOTE: You must attach a copy of your certification, billing, and proof of payment to your application. | | | | | | | |
| CIONATURE | | | | | | | |
| SIGNATURE Contification to Double and | | | | | | | |
| Certification by Producer: | | | | | | | |
| I certify that the above information is true and correct, and the operation stated above received organic certification on | | | | | | | |
| or between October 1, 2023, and September 30, 2024. | | | | | | | |
| Notice of Penalties: Penalty for knowingly making false statements or false entries, or attempts to secure money | | | | | | | |
| through fraudulent means, may include fines and/or incarceration and/or forfeiture of agriculture assistance funds | | | | | | | |
| under applicable federal and state law. | | | | | | | |
| | Date _ | | | | | | |
| Cer | 2 | | | Month / Day / | Year | | |
| Email OR Mail Application ar Documents To: | nd Supporting | For Official Use Only | | | | | |
| rnick@azda.gov | Applic | Application Number | | | Reimbursable Costs From Invoice | | |
| Arizona Department of Agrico | ulture | | | | | | |
| Citrus, Fruit and Vegetable | | □75% = | | \$ | | □ \$750 | |
| Cost Share Reimbursement | | Approved By | | | Date | | |
| 1802 W Jackson #78 | | | | | | | |
| Phoenix, Arizona 85007 Certificate Type: Crops | | | | | ndling | g 🗆 Other | |
| | | | | | | | |
| Total Number of Scopes | | | | | | | |
| | | | | | | | |