REQUEST FOR REPLACEMENT OF DRAFT

TO:	Prune Marketing Committee 3840 Rosin Court, Suite 170 Sacramento, CA 95834	Date:		
	The undersigned represents and states to the Prune Marketing Committee that draft No			
payme	nt No, da	ited, 20_	for the sum of \$	
(based	upon reserve pool prunes delive	red to	handler) issued by	
the Prune Marketing Committee (Committee) and payable to the order of the undersigned, has:				
	□ Not been received;			
	Been lost since its delivery to the undersigned and cannot be found;			
	That no person other than the undersigned payee (or payees) has any interest in or right to said draft and that the undersigned payee (or payee) is (are) entitled to receive for his (their) own account payable according to the terms of said draft.			
(or pay be so i indemi draft, o	vees) another draft in place and st ssued the undersigned payee (or nified against any claim, demand	ommittee to issue or cause to be issue tead of the draft so lost, and hereby a payees) will hold and keep the Comm, liability or loss arising out of or baster for payment by any person claimi	grees that if such other draft mittee harmless from and sed upon said lost or missing	
	Signatures	Authorized Payees Ac	ddresses	

INSTRUCTIONS: This form must be executed by any or all payees claiming loss or non-receipt of a surplus pool distribution draft, precedent to the issuance of a replacement draft. A waiting period of 30 days is required before a replacement draft will be issued. In the preparation of the form, the phrase at either (a), (b), or (c), whichever is applicable, must be checked.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0178. The time required to complete this information collection is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.