OMB No. 0581-0217

Sorghum Organic Exemption Request Form

Persons that produce and market only products eligible to be labeled as "100 percent organic" may request exemption from assessment under research and promotion programs. The information on this form is required to make a determination concerning a person's eligibility for exemption.

Type of Operation: Insert appropriate program operations. See supplemental list. (Boards that assess only one type of operation may omit this section.)

Please com	plete tl	ne following:						
Company name:					Phone:			
Street address:					Fax:			
City/State/Zip	code:				E-mail (optional):			
In order to	In order to be exempt, the above-named company must meet all of the following (please check):							
		erates under an approved organic system plan authorized by the National Organic Program OP) (7 CFR Part 205)						
		duces/handles/imports/exports/processes only products eligible for a 100% organic label						
	under the NOP Is not a split operation as defined by the Organic Foods Production Act of 1990							
Please list <u>all</u> commodities produced /handled /imported /exported /processed (Use continuation sheet if necessary):								
		Eligible to be label 100% Organio		\mathbf{C}	ommodity	Eligible to be 100% Of		
		Y 🔲 N 🗖				Y 🗖	N□	
		Y 🗆 N 🗅				Y 🗖	N□	
Y 🗆 N 🗅						Y 🗖	N□	
	A copy of this company's organic farm or organic handling operation certificate provided by a USDA-accredited certifying agent <u>must be</u> attached. Importers should attach a copy of this certificate from <i>each person</i> from whom they receive products. (Boards that do not assess importers may delete the second sentence.)						copy of	
Certification Statement I certify that, at the signing of this statement and for the signed date, the above is true.								
Signature		Tit	le			Date		
Pleas	se retur	n this form to:	Inited Sorg 201 North ubbock, T	Interstate				

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AMS-15 Supplemental List

Type of Operation Selections:						
☐ Producer	☐ Handler	☐ First Handler	☐ Processor	☐ Importer	☐ Exporter	
☐ Seed Stock Producer		☐ Feeder				

If you need more space to list commodities, please use this sheet.

Continuation Sheet for AMS-15 Organic Exemption Request Form

[Insert Commodity Board, Council or Entity Name]

Company Name:								
In order to be exe	mpt, the above-named	company must meet <u>all</u> of	the following (please ch	eck):				
_	Operates under an approved organic system plan authorized by the National Organic Program (NOP) (7 CFR Part 205)							
_	Produces/handles/imports/exports/processes only products eligible for a 100% organic label							
	under the NOP Is not a split operation as defined by the Organic Foods Production Act of 1990							
Commodity	Eligible to be labe 100% Organ		C	ligible to be labeled a 100% Organic?				
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