

Nevada State Department of Agriculture
Organic Certification Program

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Sparks NV 89431
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Organic Producer Cost Share Program Application 2015
Applications must be post-marked no later than December 1, 2015

Business: _____
Name: _____ NV Certificate # _____
Address: _____ Federal Tax ID **or** _____
_____ Social Security # _____

List below all fees and expenses required by the Department to be paid for certification between October 1, 2014 and September 30, 2015

<u>Purpose of fee paid</u>	<u>Amount</u>	<u>Date Paid</u>	<u>Invoice# & Check/C.C. trans. #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Operations in Nevada certified by another certifier are also eligible for the program. **Proof of payment must be provided by the applicant showing the purpose of the payment, date, and amount paid. The name and address of the certifier and a photocopy of the certificate issued by the certifier must also be included.**

Certifier Name and Address: _____

<u>Purpose of fee paid</u>	<u>Amount</u>	<u>Date Paid</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of Claimant

Date