



California League of Food Processors Pesticide Program Order Form

CLFP Member Company			
Purchaser Information			
Name: _____			
Company: _____			
Address: _____			
City: _____		State: _____	Zip: _____
Phone: _____		Fax: _____	
Email: _____			

Pesticide Program Forms	Cost	Qty	Total
PESTICIDE TREATMENT AND CROP HISTORY FORMS			
100 3-part carbonless sets to package - Form PTCH-NCR	\$45	x _____	\$ _____
DAILY STILL RETORT & PRODUCTION RECORD			
100 to pad - Form DSR & PR-1	\$35	x _____	\$ _____
DAILY STILL RETORT & PRODUCTION RECORD FOR WATER SPRAY			
100 to pad - Form DSR & PR-1 & WS	\$35	x _____	\$ _____
GUARANTY BY SELLER			
100 to pad - Form GBS	\$20	x _____	\$ _____
PESTICIDE CHEMICAL RIDER			
100 to pad - Form PCR	\$20	x _____	\$ _____
NOTICE TO GROWER			
100 to pad - Form NTG	\$20	x _____	\$ _____
PARTIAL REFUSAL OF DELIVERY			
100 to pad - Form PRD	\$20	x _____	\$ _____
COMPLETE REFUSAL OF DELIVERY			
100 to pad - Form CRD	\$20	x _____	\$ _____
MEMO FIELD REPORT OF PESTICIDE TREATMENTS			
50 triplicate sets per book - Form MFR	\$20	x _____	\$ _____
GROWERS PESTICIDE REPORT			
100 duplicate sets per package - Form GPR	\$20	x _____	\$ _____
GENERAL INFORMATION			
	\$15	x _____	\$ _____

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">FOR ORDERS TOTALING:</td> </tr> <tr> <td style="padding: 2px;">Up to \$25.00</td> <td style="padding: 2px;">Add \$6.50</td> </tr> <tr> <td style="padding: 2px;">\$25.01 - \$50.00</td> <td style="padding: 2px;">Add \$7.50</td> </tr> <tr> <td style="padding: 2px;">\$50.01 - \$75.00</td> <td style="padding: 2px;">Add \$8.50</td> </tr> <tr> <td style="padding: 2px;">\$75.01 - \$100.00</td> <td style="padding: 2px;">Add \$9.50</td> </tr> <tr> <td style="padding: 2px;">Over \$100.00</td> <td style="padding: 2px;">Add \$10.50</td> </tr> </table>	FOR ORDERS TOTALING:		Up to \$25.00	Add \$6.50	\$25.01 - \$50.00	Add \$7.50	\$50.01 - \$75.00	Add \$8.50	\$75.01 - \$100.00	Add \$9.50	Over \$100.00	Add \$10.50	<table style="width: 100%;"> <tr> <td style="text-align: right;">SUBTOTAL:</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td style="text-align: right;">7.75% SALES TAX:</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td style="text-align: right;">← SHIPPING CHARGES (see chart):</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td style="text-align: right;">GRAND TOTAL:</td> <td style="text-align: right;">\$ _____</td> </tr> </table>	SUBTOTAL:	\$ _____	7.75% SALES TAX:	\$ _____	← SHIPPING CHARGES (see chart):	\$ _____	GRAND TOTAL:	\$ _____
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Payment Information	Payment Method
Credit Card #: _____ Exp. Date: _____ CCV: _____ Billing Address: _____ City: _____ State: _____ Zip: _____	Check <input type="checkbox"/> MC/Visa <input type="checkbox"/> Amex <input type="checkbox"/> Invoice <input type="checkbox"/>

I authorize CLFP to charge my credit card for Pesticide Program forms. I agree to pay the amount according to card issuer agreement.

Name: _____ Cardholder Signature: _____
 (as it appears on card)

Please return this form with payment to:
 California League of Food Processors
 1755 Creekside Oaks Dr., Suite 250
 Sacramento, CA 95833
 Phone: (916) 640-8150 ♦ Fax: (916) 640-8156
 Contact: Alissa Dillon, Alissa@clfp.com