

CERTIFICATION OF NON-PRODUCER STATUS (FOR THE RESELLER)

I certify upon reselling these cattle in compliance with 7 CFR 1260.314 that I have purchased these cattle to facilitate the transfer of ownership of these cattle to a third party and I am reselling these cattle no later than 10 days from the date I purchase them; or that I have purchased these cattle and upon transfer shall receive only a sales commission or a service fee which was established prior to my purchase of the cattle.

I (the reseller) further certify that when I purchased these cattle:

(Check only one box)

- 1. I collected \$1.00 per head; or
- 2. I received a Certification of Non-Producer Status from the person I purchased these cattle from; or
- 3. I purchased these cattle in a transaction in which I was not responsible for collecting the \$1.00 per head (Auction Market or Brand Inspector).

Public Reporting burden for this collection of information is estimated to average .03 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the form. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing the burden to USDA, OIRM, Clearance Officer, Room 404-W, Washington, D.C. 20250. When replying refer to OMB Number and Form Number in your letter.

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INFORMATION IS REQUIRED BY (7 CFR 1260 174)
INFORMATION IS HELD CONFIDENTIAL (7 CFR 1260 203)
OMB 0581-0093

Failure to pay beef checkoff is a violation of federal law. This form must be properly completed and signed to be valid. You may by law be fined up to \$10,000, imprisoned up to five years, or both, for knowingly or willingly making false statements within this document (18 U.S.C. Sec. 1001).

I CLAIM NON-PRODUCER STATUS ON _____ HEAD OF CATTLE WHICH I
Number

AM RESELLING ON _____ TO:
Date

BUYER'S NAME/ADDRESS _____

PERSON CLAIMING NON-PRODUCER STATUS.
Reseller's Name: _____
Social Security # or Tax ID #: _____
Address: _____
City: _____
State/Zip: _____
Signature Of Reseller: _____