

STRAWBERRY HANDLER CONTRACT

I, _____, as a qualified representative for _____, agree to support the Florida Strawberry Growers Association in its efforts to improve the status of strawberry production and marketing. I hereby agree to match funds contributed by participating growers of all flats of strawberries handled through my facilities at a rate of \$.02 per flat, to be forwarded to the Florida Strawberry Growers Association on a regular basis, not to exceed one month from the date of processing.

The priorities of dispensing the funds accumulated by handler contributions will be determined by a majority vote of the Board of Directors of the Florida Strawberry Growers Association.

Signed _____

Title _____

Date _____

Handler Address, Phone & Fax:

