



CWT Export Assistance Application

Application Date

We hereby submit our application for export assistance under CWT's Export Assistance Program. This application is made in accordance with, and subject to the terms of the Operating Procedures of the CWT Export Assistance Program, which terms are hereby incorporated by reference. Our application for export assistance is in connection with the following sale:

1. Contact information of Applicant	Cooperative _____ Address _____ City _____ State _____ Zip _____ Phone _____ Fax _____ E-mail _____
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2. Authorized Representative Making Application	Name _____ Title _____
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3. End Customer in Country of Import	Company _____ Address _____ City _____ Country _____
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4. New Customer or Repeat Business (Check (X) one): New _____ Repeat _____

5. Eligible Dairy Product	<input type="checkbox"/> Butter <input type="checkbox"/> Cheese <i>Specify variety:</i> <input type="checkbox"/> Block <input type="checkbox"/> Barrel/640 <input type="checkbox"/> Whole Milk Powder (WMP) <i>Specify:</i> Butterfat _____ % Solids not fat _____ % Moisture _____ % Packaging <input type="checkbox"/> Bulk <input type="checkbox"/> Retail
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6. Contract Quantity of Eligible Dairy Product (in metric tons)	_____ metric tons
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7. Country of Final Destination	_____
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8. Delivery/Shipping Period (Please specify 3 month window)	_____
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9. Amount of Export Assistance Requested (in U.S. dollars per metric ton)	_____ U.S. dollars / metric ton
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For Office Use Only

Bid Reference Number *Date of Acceptance*

Accepted Amount of Export Assistance (in USD per MT)

Accepted by: _____