



REQUEST FOR CONCILIATION
Under The Cooperative Bargaining Associations Act
(Food and Agricultural Code, Division 20, Chapter 2, Article 3.5)

REQUESTING PARTY

A copy of this request, including the information specified below, must be express-mailed to the responding party on the same day it is submitted to the Department. Please enclose a copy of the express mail receipt or similar evidence of delivery to the responding party when submitting this request to the Department. Please also enclose a check for \$500 made out to the Cashier, California Department of Food and Agriculture to cover Department costs.

Requesting Party please supply the information requested below.

1. A brief statement of when negotiations between the parties began and a summary of events since that date.
2. The last offer made to the responding party.
3. Reasons for rejection of the responding party's last offer.
4. An indication of what the requesting party believes would be required to reach an agreement.

⇓ Please type or print ⇓

Business Name _____

Address _____ City/State _____

Telephone _____ Fax _____

Name of Requesting Person _____ Title _____

Signature _____ Date _____

Pursuant to provisions of the California Food and Agricultural Code (Sections 54451-54458), the party named above does hereby request that Secretary of the California Department of Food and Agriculture order a conciliation between the Requesting Party and the Responding Party named below.

RESPONDING PARTY

Business Name _____

Name of Responding Person _____

Address _____ City/State _____

Telephone _____ Fax _____

SUBMIT THIS FORM AND REQUESTED MATERIAL TO:

Mr. Robert Maxie, Chief
Marketing Branch
California Department of Food and Agriculture
1220 N Street
Sacramento, California 95814-5621

TELEPHONE: (916) 900-5018
FAX: (916) 900-5343
EMAIL: BMaxie@cdfa.ca.gov