

Florida Department of Agriculture and Consumer Services Division of Consumer Services

ANSWER OF RESPONDENT

Sections 601.66 and 604.21, Florida Statutes Rule 5J-25.009, Florida Administrative Code Phone (850) 410-3800; Fax (850) 410-3801

Please return to:

FDACS Division of Consumer Services Mediation & Enforcement 2005 Apalachee Parkway Tallahassee, FL 32399-6500

Complainant:		d/b/a			
(Producer)		(Individual, Partners, Corp., Co-op.)			
Address:					
Street	City	State Zip Cod	e Telephone		
Respondent		d/b/a			
(Dealer)		(Individual	Partners, Corp.)		
Address:					
Street	City	State Zip Cod	e Telephone		
Co-Respondent:		. as Sı	rety for Respondent.		
(Surety)		,			
Addross:					
Address: Street	City	State Zip Cod	e Telephone		
Complainant's claim is: adn	nitted as valid, den	ied as valid, satist	ned		

(CONTINUE ON SEPARATE SHEET IF NECESSARY)

(Continue on Back)

10. Terms of purchase (Ch	eck appropria	te line): f.o.b.	, delivered	, or other
(please specify):				
11. Purchased by	:	after inspection	, by telep	hone
by fax	_, other	(please spec	ify):	
From				
12. In support of this answ	ver, hereto att	tached is the follow	ing documentary ev	idence:
(Invoice, Inspection Certificate, Manife	est, Shipping Order	, Receipt or Other.)		
13. BY COMPLETING TO INSTRUCTIONS PRO		•	*	
14. Print or Type Legal Name of Resp	pondent			
d/b/a				
15				
15. Signature of Individual, Partner, o				
TITLE:(Owner or Officer of				