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CANCEL OPT-OUT NOTIFICATION

NOTIFICATION TO CANCEL OPT-OUT of Council Assessment

1. All applications should be submitted via U.S. Mail to:
New Mexico Beef Council
1209 Mountain Rd. Pl. NE, Suite C
Albuquerque, NM 87110
2. Applicant's name must be exactly the same as it appears on the NMLB Master Brand.
3. Notification to Cancel Opt-Out must be signed by applicant.
4. Each form has a sequential and unique identifying number. **Form may not be duplicated.** You must submit one form for each brand you want to cancel the Opt-Out status.
5. Incomplete forms will not be accepted.
6. For additional information, call 505-841-9407 or email StateAssessment@NMBeef.com.

Sample

Name of Beef Producer, Cattle Company / Dairy: _____

Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Name on NMLB Master Brand (*as it appears on Master Brand card*) _____

NMLB Master Brand Number _____

By signing below, applicant:

1. Certifies that all information provided in connection with this to Cancel Opt-Out Notification is true and correct;
2. Certifies that applicant is authorized to make these representations as an owner;
3. Acknowledges that any misrepresentation or false statement made in connection with this notification, whether intentional or not, will constitute grounds for denial;
4. Authorizes the NMBC to change the Opt-Out status of the brand and begin collecting the Council Assessment;
5. Agrees, in the event adequate verification data is unavailable, to cooperate with the NMBC or its agents to provide verification data satisfactory to the NMBC;

THE COUNCIL WILL NOTIFY THE PRODUCER SUBMITTING THE CANCEL OPT-OUT NOTIFICATION WITHIN 30 DAYS FROM THE DATE OF RECEIPT OF THE COMPLETED FORM.

Signature of Applicant _____ Date Signed: _____

Printed name of individual signing above: _____

Title (if signing as a representative for a partnership, company, or other entity): _____

Postmark: _____ Received: _____ Verified by NMBC: _____ Date Mailed: _____