

**INSTRUCTIONS FOR
HANDLING & MARKETING OF PERISHABLE COMMODITIES
VERIFIED COMPLAINT
FORM NO. RPC-405**

CLAIM NUMBER

This number will be assigned by the Texas Department of Agriculture.

COMPLAINANT

State the full legal business name (owner's name if sole proprietor – no aliases).

RESPONDENT

State the full legal business name (owner's name if sole proprietor – no aliases) of the party you are filing against.

COMES NOW

State the full legal business name (owner's name if sole proprietor – no aliases) of the *Complainant*, and the full legal business name (owner's name if sole proprietor – no aliases) of the *Respondent*.

I.

- Indicate the name of the *perishable commodity* that the *Complainant* was the producer or owner of, and identify the county(s) where the perishable commodity(s) was grown. State the *Complainant's* principal place of business, and the telephone number.

II.

- Indicate the name under which the *Respondent* was licensed by the Texas Department of Agriculture, state *Respondent's* principal place of business, and telephone number.

III.

- Indicate when you believe the *Respondent* violated the Handling and Marketing of Perishable Commodities Act, (violating the terms and conditions of a contract between Complainant and Respondent), state the date(s) of the violation, and explain the transactions that took place. Please attach all receipts, contracts, invoices, bills, etc. which may bear on alleged violation.

IV.

- State the *amount of money* that such violation has aggrieved *Complainant*.
- Please sign , and date in front of a Notary Public. A Notary Public *must* notarize the **Verified Complaint**.