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**U.S. DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
SCIENCE AND TECHNOLOGY
PLANT VARIETY PROTECTION OFFICE
BELTSVILLE, MD 20705**

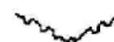
Exhibit C

**OBJECTIVE DESCRIPTION OF VARIETY
Cabbage (*Brassica oleracea* var. *capitata* L.)**

NAME OF APPLICANT (S)	TEMPORARY OR EXPERIMENTAL DESIGNATION	VARIETY NAME
ADDRESS (Street and No. or RD No., City, State, Zip Code and Country)		FOR OFFICIAL USE ONLY
		PVPO NUMBER

PLEASE READ ALL INSTRUCTIONS CAREFULLY:

In the spaces on the left, enter the appropriate numbers that describe the characteristics of the application variety. On the right, enter the appropriate numbers that describe the characteristics of the most similar comparison variety. Right justify whole numbers by adding leading zeros if necessary. The variety that you choose for comparison should be the most similar one in terms of overall morphology, background and maturity. The comparison variety should be grown in field trials with the application variety for 2-3 location/years (environments) in the region and season of best adaptability. At least one year of trials should be conducted within the United States of America. In general, measurements of quantitative traits should be taken **from one trial on 15-25 randomly selected plants or plant parts** to obtain averages and statistics that describe a typical field of the variety. (Form technical content last updated April 2005.)

Application Variety	Comparison Variety
<p>A. PLANT TRAITS: (At Market Maturity)</p> <p>___ mm Plant Height</p> <p>___ mm Maximum Plant Diameter/Width (including non-head leaves)</p> <p>___ cm Length of Outer Stem</p> <p>___ days Days to Market Maturity (from Planting)</p>	<p>Comparison Variety Name _____</p> <p>___ mm Plant Height</p> <p>___ mm Maximum Plant Diameter/Width</p> <p>___ cm Length of Outer Stem</p> <p>___ days Days to Market Maturity</p>
<p>B. FOLIAGE TRAITS OF NON-HEAD LEAVES:</p> <p>___ Foliage Color: 1 = Light Green 2 = Medium Green 3 = Dark Green 4 = Dark Red 5 = Other (Specify Verbally) _____</p> <p>Color Chart Name _____ Color Chart Code _____</p> <p>___ Seedling Anthocyanin: 1 = Present 2 = Absent</p> <p>___ Seedling Anthocyanin Present: 1 = Leaves Only 2 = Stem Only 3 = Stem & Leaves</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  1 = Entire </div> <div style="text-align: center;">  2 = Sinuated </div> </div> <div style="display: flex; justify-content: space-around; align-items: center; margin-top: 10px;"> <div style="text-align: center;">  1 = Straight </div> <div style="text-align: center;">  2 = Wavy </div> <div style="text-align: center;">  3 = Folded </div> </div>	<p>___ Foliage Color (Verbal)</p> <p>Color Chart Code _____</p> <p>___ Seedling Anthocyanin</p> <p>___ Seedling Anthocyanin Present</p> <p>___ Leaf Outline:</p> <p>___ Leaf Cross Section</p>
Application Variety	Comparison Variety

Application Variety	Comparison Variety
<p>D. FLOWER AND SEED TRAITS:</p> <p><input type="checkbox"/> Flower Color 1 = White 2 = Cream 3 = Yellow 4 = Other (Specify) _____</p> <p>Color Chart Name _____ Color Chart Code _____</p> <p><input type="checkbox"/> mm Flower Diameter</p> <p><input type="checkbox"/> mm Height of Inflorescence (From Ground Level)</p> <p><input type="checkbox"/> Seed Coat Color: 1 = White 2 = Cream 3 = Tan 4 = Brown 5 = Black 6 = Other (Specify) _____</p> <p>Color Chart Name _____ Color Chart Code _____</p> <p><input type="checkbox"/> mm Seed Length</p> <p><input type="checkbox"/> gm Weight per 1000 Seeds</p>	<p><input type="checkbox"/> Flower Color</p> <p>Color Chart Code _____</p> <p><input type="checkbox"/> mm Flower Diameter</p> <p><input type="checkbox"/> mm Height of Inflorescence</p> <p><input type="checkbox"/> Seed Coat Color</p> <p>Color Chart Code _____</p> <p><input type="checkbox"/> mm Seed Length</p> <p><input type="checkbox"/> gm Weight per 1000 Seeds</p>
<p>E. DISEASE RESISTANCE: (1 = most susceptible; 9 = most resistant)</p> <p><input type="checkbox"/> Fusarium Yellows (<i>Fusarium oxysporum conglutinans</i>)</p> <p><input type="checkbox"/> Clubroot (<i>Plasmodiophora brassicae</i>)</p> <p><input type="checkbox"/> Downy Mildew (<i>Peronospora parasitica</i>)</p> <p><input type="checkbox"/> Gray Leaf Spot (<i>Alternaria brassicae</i>)</p> <p><input type="checkbox"/> Black Rot (<i>Xanthomonas campestris</i>)</p> <p><input type="checkbox"/> Black Leg (<i>Phoma lingam</i>)</p> <p><input type="checkbox"/> Bacterial Soft Rot (<i>Erwinia carotovora</i>)</p> <p><input type="checkbox"/> Cabbage Mosaic Virus</p>	<p><input type="checkbox"/> Fusarium Yellows</p> <p><input type="checkbox"/> Clubroot</p> <p><input type="checkbox"/> Downy Mildew</p> <p><input type="checkbox"/> Gray Leaf Spot</p> <p><input type="checkbox"/> Black Rot</p> <p><input type="checkbox"/> Black Leg</p> <p><input type="checkbox"/> Bacterial Soft Rot</p> <p><input type="checkbox"/> Cabbage Mosaic Virus</p>
<p>F. INSECT RESISTANCE: (1 = most susceptible; 2 = most resistant):</p> <p><input type="checkbox"/> Cabbage Root Maggots</p> <p><input type="checkbox"/> Cabbage Looper</p> <p><input type="checkbox"/> Aphids</p> <p><input type="checkbox"/> Flea Beetles</p> <p><input type="checkbox"/> Cutworms</p> <p><input type="checkbox"/> Nematodes (<i>Meliodogyne</i> spp.)</p> <p><input type="checkbox"/> Diamondback Moth (<i>Plutella xylostella</i>)</p> <p><input type="checkbox"/> Imported Cabbage Worm</p>	<p><input type="checkbox"/> Cabbage Root Maggots</p> <p><input type="checkbox"/> Cabbage Looper</p> <p><input type="checkbox"/> Aphids</p> <p><input type="checkbox"/> Flea Beetles</p> <p><input type="checkbox"/> Cutworms</p> <p><input type="checkbox"/> Nematodes</p> <p><input type="checkbox"/> Diamondback Moth</p> <p><input type="checkbox"/> Imported Cabbage Worm</p>
<p>G. PHYSIOLOGICAL RESISTANCE: (1 most susceptible; 2 most resistant)</p> <p><input type="checkbox"/> Heat</p> <p><input type="checkbox"/> Drought</p> <p><input type="checkbox"/> Frost</p> <p><input type="checkbox"/> Bolting</p> <p><input type="checkbox"/> Tipburn</p>	<p><input type="checkbox"/> Heat</p> <p><input type="checkbox"/> Drought</p> <p><input type="checkbox"/> Frost</p> <p><input type="checkbox"/> Bolting</p> <p><input type="checkbox"/> Tipburn</p>
<p>H. COMMENTS (continue in Exhibit D):</p>	