CRANBERRY MARKETING COMMITTEE
219A Main Street
Wareham, MA 02571
Phone: (508) 291-1510
Fax: (508) 291-1511

LEASED ACREAGE FORM
20__ CROP YEAR

Complete and return this form to the Cranberry Marketing Committee.

LEASED FROM: Lessor

Name: ________________________________
Business Name (or D/B/A): ________________________________
Address: ____________________________________________
Telephone No.: ________________________________

Grower No. _________________

LEASED TO: Lessee

Name: ________________________________
Business Name (or D/B/A): ________________________________
Address: ____________________________________________
Telephone No.: ________________________________

Grower No. _________________

LEASE INFORMATION AND TERMS

If this is a total lease of the Lessor’s owned acreage, complete 1(a) through (d). If this is a partial lease, complete 2(a) through (e).

1. TOTAL lease of Lessor’s owned acreage
   a) How many acres are being leased? __________ acres.
   b) What is the length of this lease? __________ years.
   c) On what date did this lease commence? __________ (day/month/year)
   d) On what date will this lease terminate? __________ (day/month/year)

   Note: All production history associated with the acreage being leased will be transferred to the Lessee.

2. PARTIAL lease of Lessor’s owned acreage
   a) How many acres are being leased? __________ acres.
   b) What is the length of this lease? __________ years.
   c) On what date did this lease commence? __________ (day/month/year)
   d) On what date will this lease terminate? __________ (day/month/year)
   e) Indicate the amount of sales history being conveyed (transferred) along with the leased acreage for each of the crop years shown below. Note: Prior crop years’ sales history attributable to the acreage being leased must be transferred.

<table>
<thead>
<tr>
<th>Crop Year</th>
<th>201__</th>
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<tbody>
<tr>
<td>Sales History</td>
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I hereby certify that to the best of my knowledge, the information contained herein is true and accurate.

Lessor’s signature ________________________________  Date __________________

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