

Florida Department of Agriculture and Consumer Services
Division of Marketing and Development

**STATE PARTICIPATION AGREEMENT (SPA)
CHECKLIST**

To help you ensure that all aspects of your SPA have been addressed and that all documents are enclosed, please check the lines next to the items listed below. When completed, please return the required documents; place this checklist on top and forward to the Florida Department of Agriculture and Consumer Services, Bureau of Food Distribution for approval. **Do not** submit a partial agreement package. Your agreement will not be approved unless the entire package is completed as instructed.

1. _____ Completed and signed State Participation Agreement - SPA
2. _____ Value Pass Through (VPT) System Selected
3. _____ Copy of Sales Verification Plan Included (if Net Price Through Distributor (NOI) was selected)
4. _____ Signed Summary End Product Data Schedules (SEPDS)
5. _____ Subcontractor Information Completed (if applicable)
6. _____ Red Meat Processors – Grading Selected
7. _____ Processor has registered on USDA’s Electronic Commodity Ordering System (ECOS)
8. _____ Processor has provided broker and distributor information (if applicable)
9. _____ Completed Destination Data for the Delivery of USDA Commodities form. If you have multiple receiving/processing plant locations, please specify commodity for each location– using one form per location.
10. _____ Hold/Recall or Disaster Contact Form

Signature of the Authorized Representative for the Processor

Date Signed

Printed Name of the Authorized Representative for the Processor

Printed Name of the Processor

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