



H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor

**A. Job Offer Information**

|                                                                                                                                                                                                      |                |                                                                            |                                 |                                 |              |                                                                                                                                                                                                                     |             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------|---------------------------------|---------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 1. Job Title * <b>Berry workers</b>                                                                                                                                                                  |                |                                                                            |                                 |                                 |              |                                                                                                                                                                                                                     |             |
| 2. Workers Needed *                                                                                                                                                                                  | a. Total       | b. H-2A Workers                                                            | Period of Intended Employment   |                                 |              |                                                                                                                                                                                                                     |             |
|                                                                                                                                                                                                      | <b>50</b>      | <b>50</b>                                                                  | 3. First Date * <b>4/8/2024</b> | 4. Last Date * <b>6/30/2024</b> |              |                                                                                                                                                                                                                     |             |
| 5. Will this job generally require the worker to be on-call 24 hours a day and 7 days a week? *<br>If "Yes", proceed to question 8. If "No", complete questions 6 and 7 below.                       |                |                                                                            |                                 |                                 |              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                 |             |
| 6. Anticipated days and hours of work per week (an entry is required for each box below) *                                                                                                           |                |                                                                            |                                 |                                 |              | 7. Hourly Work Schedule *                                                                                                                                                                                           |             |
| <b>42</b>                                                                                                                                                                                            | a. Total Hours | <b>7</b>                                                                   | c. Monday                       | <b>7</b>                        | e. Wednesday | <b>7</b>                                                                                                                                                                                                            | g. Friday   |
| <b>0</b>                                                                                                                                                                                             | b. Sunday      | <b>7</b>                                                                   | d. Tuesday                      | <b>7</b>                        | f. Thursday  | <b>7</b>                                                                                                                                                                                                            | h. Saturday |
|                                                                                                                                                                                                      |                |                                                                            |                                 |                                 |              | a. <b>8</b> : <b>00</b> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM                                                                                                                          |             |
|                                                                                                                                                                                                      |                |                                                                            |                                 |                                 |              | b. <b>4</b> : <b>00</b> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM                                                                                                                          |             |
| <b>Temporary Agricultural Services and Wage Offer Information</b>                                                                                                                                    |                |                                                                            |                                 |                                 |              |                                                                                                                                                                                                                     |             |
| 8a. Job Duties - Description of the specific services or labor to be performed. *<br>(Please begin response on this form and use Addendum C if additional space is needed.)<br><b>See Addendum C</b> |                |                                                                            |                                 |                                 |              |                                                                                                                                                                                                                     |             |
| 8b. Wage Offer *                                                                                                                                                                                     |                | 8c. Per *                                                                  |                                 | 8d. Piece Rate Offer \$         |              | 8e. Piece Rate Units / Estimated Hourly Rate / Special Pay Information \$                                                                                                                                           |             |
| \$ <b>15</b> . <b>81</b>                                                                                                                                                                             |                | <input checked="" type="checkbox"/> HOUR<br><input type="checkbox"/> MONTH |                                 | \$ <b>02</b> . <b>50</b>        |              | Per 6 lb bucket blueberry hand harvest. Estimated hourly wage rate equivalent is \$15 based on average 6 piece rate units per hour. Actual piece rate earnings depend on individual factors. Guaranteed \$15.81/hr. |             |
| 9. Is a completed <b>Addendum A</b> providing additional information on the crops or agricultural activities to be performed and wage offers attached to this job offer? *                           |                |                                                                            |                                 |                                 |              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A                                                                                                                                                |             |
| 10. Frequency of Pay: * <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Other (specify): <u>N/A</u>                                            |                |                                                                            |                                 |                                 |              |                                                                                                                                                                                                                     |             |
| 11. State all deduction(s) from pay and, if known, the amount(s). *<br>(Please begin response on this form and use Addendum C if additional space is needed.)<br><b>See Addendum C</b>               |                |                                                                            |                                 |                                 |              |                                                                                                                                                                                                                     |             |

H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor



**B. Minimum Job Qualifications/Requirements**

|                                                                                                                                                                                                                                                             |  |                                                                          |                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 1. Education: minimum U.S. diploma/degree required. *                                                                                                                                                                                                       |  |                                                                          |                                                                                     |
| <input checked="" type="checkbox"/> None <input type="checkbox"/> High School/GED <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's or higher <input type="checkbox"/> Other degree (JD, MD, etc.) |  |                                                                          |                                                                                     |
| 2. Work Experience: number of <u>months</u> required. *                                                                                                                                                                                                     |  | 1                                                                        | 3. Training: number of <u>months</u> required. * 0                                  |
| 4. Basic Job Requirements (check all that apply) §                                                                                                                                                                                                          |  |                                                                          |                                                                                     |
| <input type="checkbox"/> a. Certification/license requirements                                                                                                                                                                                              |  | <input checked="" type="checkbox"/> f. Exposure to extreme temperatures  |                                                                                     |
| <input type="checkbox"/> b. Driver requirements                                                                                                                                                                                                             |  | <input checked="" type="checkbox"/> g. Extensive pushing or pulling      |                                                                                     |
| <input type="checkbox"/> c. Criminal background check                                                                                                                                                                                                       |  | <input checked="" type="checkbox"/> h. Extensive sitting or walking      |                                                                                     |
| <input checked="" type="checkbox"/> d. Drug screen                                                                                                                                                                                                          |  | <input checked="" type="checkbox"/> i. Frequent stooping or bending over |                                                                                     |
| <input checked="" type="checkbox"/> e. Lifting requirement <u>75</u> lbs.                                                                                                                                                                                   |  | <input checked="" type="checkbox"/> j. Repetitive movements              |                                                                                     |
| 5a. Supervision: does this position supervise the work of other employees? *                                                                                                                                                                                |  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      | 5b. If "Yes" to question 5a, enter the number of employees worker will supervise. § |
| 6. Additional Information Regarding Job Qualifications/Requirements. *<br>(Please begin response on this form and use Addendum C if additional space is needed. If no additional skills or requirements, enter " <b>NONE</b> " below)<br>See Addendum C     |  |                                                                          |                                                                                     |

**C. Place of Employment Information**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                |                  |                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------|----------------------------------------------------------------------|
| 1. Place of Employment Address/Location *                                                                                                                                                                                                                                                                                                                                                                                                              |                |                  |                                                                      |
| 3500 NC Hwy 133                                                                                                                                                                                                                                                                                                                                                                                                                                        |                |                  |                                                                      |
| 2. City *                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3. State *     | 4. Postal Code * | 5. County *                                                          |
| Rocky Point                                                                                                                                                                                                                                                                                                                                                                                                                                            | North Carolina | 28457            | Pender                                                               |
| 6. Additional Place of Employment Information. (If no additional information, enter " <b>NONE</b> " below) *<br>Fixed-site employer. Employer owns/controls the work site. Primary work site address includes all employer's fields located adjacent/nearby. Empleador de sitio fijo. El empleador posee/controla el sitio de trabajo. La direccin del sitio de trabajo principal incluye todos los campos del empleador ubicados adyacentes/cercanos. |                |                  |                                                                      |
| 7. Is a completed <b>Addendum B</b> providing additional information on the places of employment and/or agricultural businesses who will employ workers, or to whom the employer will be providing workers, attached to this job order? *                                                                                                                                                                                                              |                |                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A |

**D. Housing Information**

|                                                                                                                                                                                                                                                                                                                             |                |                       |                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------|----------------------------------------------------------------------|
| 1. Housing Address/Location *                                                                                                                                                                                                                                                                                               |                |                       |                                                                      |
| S23545--370 Neck Farm Rd                                                                                                                                                                                                                                                                                                    |                |                       |                                                                      |
| 2. City *                                                                                                                                                                                                                                                                                                                   | 3. State *     | 4. Postal Code *      | 5. County *                                                          |
| Rocky Point                                                                                                                                                                                                                                                                                                                 | North Carolina | 28457                 | Pender                                                               |
| 6. Type of Housing (check only one) *<br><input checked="" type="checkbox"/> Employer-provided (including mobile or range) <input type="checkbox"/> Rental or public                                                                                                                                                        |                | 7. Total Units *<br>1 | 8. Total Occupancy *<br>20                                           |
| 9. Identify the entity that determined the housing met all applicable standards: *<br><input type="checkbox"/> Local authority <input checked="" type="checkbox"/> SWA <input checked="" type="checkbox"/> Other State authority <input type="checkbox"/> Federal authority <input type="checkbox"/> Other (specify): _____ |                |                       |                                                                      |
| 10. Additional Housing Information. (If no additional information, enter " <b>NONE</b> " below) *<br>See Addendum C                                                                                                                                                                                                         |                |                       |                                                                      |
| 11. Is a completed <b>Addendum B</b> providing additional information on housing that will be provided to workers attached to this job order? *                                                                                                                                                                             |                |                       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A |

H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor



**E. Provision of Meals**

1. Describe how the employer will provide each worker with three meals per day or furnish free and convenient cooking and kitchen facilities. \*

(Please begin response on this form and use Addendum C if additional space is needed.)

Employer will furnish free and convenient cooking and kitchen facilities so workers may prepare their own meals. Workers will buy their own groceries. Once a week, the employer will provide (on a voluntary basis) transportation to assure workers access to stores where they can purchase groceries. These board arrangements apply only to workers living in employer-provided housing. Empleador proporcionara instalaciones de cocina gratis y conveniente para los trabajadores viviendo en la vivienda proporcionada para que los trabajadores pueden prepararse su propia comida. Transporte gratuito en un vehiculo sera proporcionado al menos una vez cada semana por los trabajadores para comprar sus propios alimentos. Estos arreglos aplicar solamente a trabajadores que viven en la vivienda provistos por el empleador.

2. The employer: \*

☒ **WILL NOT** charge workers for meals.

☐ **WILL** charge each worker for meals at \$        .        per day, if meals are provided.

**F. Transportation and Daily Subsistence**

1. Describe the terms and arrangements for daily transportation the employer will provide to workers. \*

(Please begin response on this form and use Addendum C if additional space is needed.)

Employer will offer voluntary transportation at no cost to those workers living in housing provided by the employer and for commuting workers who report to a designated daily job reporting site. The mode of transportation may be 4 buses each with a seating capacity for 44 passengers.

-The employer operates at least 6-40 passenger buses and 3-15 passenger vans.

2. Describe the terms and arrangements for providing workers with transportation (a) to the place of employment (i.e., inbound) and (b) from the place of employment (i.e., outbound). \*

(Please begin response on this form and use Addendum C if additional space is needed.)

See Addendum C

3. During the travel described in Item 2, the employer will pay for or reimburse daily meals by providing each worker \*

a. no less than

\$ 15 . 46

per day \*

b. no more than

\$ 59 . 00

per day with receipts

**G. Referral and Hiring Instructions**

H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor



1. Explain how prospective applicants may be considered for employment under this job order, including verifiable contact information for the employer (or the employer's authorized hiring representative), methods of contact, and the days and hours applicants will be considered for the job opportunity. \*

(Please begin response on this form and use Addendum C if additional space is needed.)

See Addendum C

2. Telephone Number to Apply \*  
+1 (910) 675-2394

3. Extension §  
N/A

4. Email Address to Apply \*  
info@lewisfarms.com

5. Website Address (URL) to Apply \*  
<https://seasonaljobs.dol.gov/>

**H. Additional Material Terms and Conditions of the Job Offer**

1. Is a completed **Addendum C** providing additional information about the material terms, conditions, and benefits (monetary and non-monetary) that will be provided by the employer attached to this job order? \*

☒ Yes ☐ No

**I. Conditions of Employment and Assurances for H-2A Agricultural Clearance Orders**

By virtue of my signature below, I **HEREBY CERTIFY** my knowledge of and compliance with applicable Federal, State, and local employment-related laws and regulations, including employment-related health and safety laws, and certify the following conditions of employment:

- JOB OPPORTUNITY:** Employer assures that the job opportunity identified in this clearance order (hereinafter also referred to as the "job order") is a full-time temporary position being placed with the SWA in connection with an *H-2A Application for Temporary Employment Certification* for H-2A workers and this clearance order satisfies the requirements for agricultural clearance orders in 20 CFR part 653, subpart F and the requirements set forth in 20 CFR 655, subpart B. This job opportunity offers U.S. workers no less than the same benefits, wages, and working conditions that the employer is offering, intends to offer, or will provide to H-2A workers and complies with the requirements at 20 CFR part 655, subpart B. The job opportunity is open to any qualified U.S. worker regardless of race, color, national origin, age, sex, religion, handicap, or citizenship.
- NO STRIKE, LOCKOUT, OR WORK STOPPAGE:** Employer assures that this job opportunity, including all places of employment for which the employer is requesting temporary agricultural labor certification does not currently have workers on strike or being locked out in the course of a labor dispute. 20 CFR 655.135(b).
- HOUSING FOR WORKERS:** Employer agrees to provide or secure housing for the H-2A workers and those workers in corresponding employment who are not reasonably able to return to their residence at the end of the work day. That housing complies with the applicable local, State, and/or Federal standards and is sufficient to house the specified number of workers requested through the clearance system. The employer will provide the housing without charge to the worker. Any charges for rental housing will be paid directly by the employer to the owner or operator of the housing. If public accommodations or public housing are provided to workers, the employer agrees to pay all housing-related charges directly to the housing's management. The employer agrees that charges in the form of deposits for bedding or other similar incidentals related to housing (e.g., utilities) must not be levied upon workers. However, the employer may require workers to reimburse them for damage caused to housing by the individual worker(s) found to have been responsible for damage which is not the result of normal wear and tear related to habitation. When it is the prevailing practice in the area of intended employment and the occupation to provide family housing, the employer agrees to provide family housing at no cost to workers with families who request it. 20 CFR 655.122(d), 653.501(c)(3)(vi).  
*Request for Conditional Access to Intrastate or Interstate Clearance System:* Employer assures that the housing disclosed on this clearance order will be in full compliance with all applicable local, State, and/or Federal standards at least 20 calendar days before the housing is to be occupied. 20 CFR 653.502(a)(3). The Certifying Officer will not certify the application until the employer provides evidence that housing has been inspected and approved or, in the case of rental or public accommodations, is otherwise in full compliance.
- WORKERS' COMPENSATION COVERAGE:** Employer agrees to provide workers' compensation insurance coverage in compliance with State law covering injury and disease arising out of and in the course of the worker's employment. If the type of employment for which the certification is sought is not covered by or is exempt from the State's workers' compensation law, the employer agrees to provide, at no cost to the worker, insurance covering injury and disease arising out of and in the course of the worker's employment that will provide benefits at least equal to those provided under the State workers' compensation law for other comparable employment. 20 CFR 655.122(e).
- EMPLOYER-PROVIDED TOOLS AND EQUIPMENT:** Employer agrees to provide to the worker, without charge or deposit charge, all tools, supplies, and equipment required to perform the duties assigned. 20 CFR 655.122(f), .210(d), or .302(c).



H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor

6. **MEALS:** Employer agrees to provide each worker with three meals a day or furnish free and convenient cooking and kitchen facilities to the workers that will enable the workers to prepare their own meals. Where the employer provides the meals, the job offer will state the charge, if any, to the worker for such meals. The amount of meal charges is governed by 20 CFR 655.173. 20 CFR 655.122(g). When a charge or deduction for the cost of meals would bring the worker's wage below the minimum wage set by the FLSA at 29 U.S.C. 206, the charge or deduction must meet the requirements of 29 U.S.C. 203(m) of the FLSA, including the recordkeeping requirements found at 29 CFR 516.27.

For workers engaged in the herding or production of livestock on the range, the employer agrees to provide each worker, without charge or deposit charge, (1) either three sufficient meals a day, or free and convenient cooking facilities and adequate provision of food to enable the worker to prepare his own meals. To be sufficient or adequate, the meals or food provided must include a daily source of protein, vitamins, and minerals; and (2) adequate potable water, or water that can be easily rendered potable and the means to do so. 20 CFR 655.210(e).

7. **TRANSPORTATION AND DAILY SUBSISTENCE:** Employer agrees to provide the following transportation and daily subsistence benefits to eligible workers.

A. *Transportation to Place of Employment (Inbound)*

If the worker completes 50 percent of the work contract period, and the employer did not directly provide such transportation or subsistence or otherwise has not yet paid the worker for such transportation or subsistence costs, the employer agrees to reimburse the worker for reasonable costs incurred by the worker for transportation and daily subsistence from the place from which the worker came to work for the employer to the employer's place of employment, whether in the U.S. or abroad. The amount of the transportation payment must be no less (and is not required to be more) than the most economical and reasonable common carrier transportation charges for the distances involved. The amount the employer will pay for daily subsistence expenses are those amounts disclosed in this clearance order, which are at least as much as the employer would charge the worker for providing the worker with three meals a day during employment (if applicable), but in no event will be less than the amount permitted under 20 CFR 655.173(a). The employer understands that the Fair Labor Standards Act applies independently of the H-2A requirements and imposes obligations on employers regarding payment of wages. 20 CFR 655.122(h)(1).

B. *Transportation from Place of Employment (Outbound)*

If the worker completes the work contract period, or is terminated without cause, and the worker has no immediate subsequent H-2A employment, the employer agrees to provide or pay for the worker's transportation and daily subsistence from the place of employment to the place from which the worker, disregarding intervening employment, departed to work for the employer. Return transportation will not be provided to workers who voluntarily abandon employment before the end of the work contract period, or who are terminated for cause, if the employer follows the notification requirements in 20 CFR 655.122(n).

If the worker has contracted with a subsequent employer who has not agreed in such work contract to provide or pay for the worker's transportation and daily subsistence expenses from the employer's place of employment to such subsequent employer's place of employment, the employer must provide for such expenses. If the worker has contracted with a subsequent employer who has agreed in such work contract to provide or pay for the worker's transportation and daily subsistence expenses from the employer's place of employment to such subsequent employer's place of employment, the subsequent employer must provide or pay for such expenses.

The employer is not relieved of its obligation to provide or pay for return transportation and subsistence if an H-2A worker is displaced as a result of the employer's compliance with the employer's obligation to hire U.S. workers who apply or are referred after the employer's date of need during the recruitment period set out in 20 CFR 655.135(d). 20 CFR 655.122(h)(2).

C. *Daily Transportation*

Employer agrees to provide transportation between housing provided or secured by the employer and the employer's place(s) of employment at no cost to the worker. 20 CFR 655.122(h)(3).

D. *Compliance with Transportation Standards*

Employer assures that all employer-provided transportation will comply with all applicable Federal, State, or local laws and regulations. Employer agrees to provide, at a minimum, the same transportation safety standards, driver licensure, and vehicle insurance as required under 29 U.S.C. 1841 and 29 CFR 500.104 or 500.105 and 29 CFR 500.120 to 500.128. If workers' compensation is used to cover transportation, in lieu of vehicle insurance, the employer will ensure that such workers' compensation covers all travel or that vehicle insurance exists to provide coverage for travel not covered by workers' compensation. Employer agrees to have property damage insurance. 20 CFR 655.122(h)(4).

8. **THREE-FOURTHS GUARANTEE:** Employer agrees to offer the worker employment for a total number of work hours equal to at least three-fourths of the workdays of the total period beginning with the first workday after the arrival of the worker at the place of employment or the advertised contractual first date of need, whichever is later, and ending on the expiration date specified in the work contract or in its extensions, if any. 20 CFR 655.122(i).

The employer may offer the worker more than the specified hours of work on a single workday. For purposes of meeting the three-fourths guarantee, the worker will not be required to work for more than the number of hours specified in the job order for a workday, or on the worker's Sabbath or Federal holidays. If, during the total work contract period, the employer affords the U.S. or H-2A worker less employment than that required under this guarantee, the employer will pay such worker the amount the worker would have earned had the worker, in fact, worked for the guaranteed number of days. An employer will not be considered to have met the work guarantee if the employer has merely offered work on three-fourths of the workdays if each workday did not consist of a full number of hours of work time as specified in the job order. All hours of work actually performed may be counted by the employer in calculating whether the period of guaranteed employment has been met. Any hours the worker fails to work, up to a maximum of the number of hours specified in the job order for a workday, when the worker has been offered an opportunity to work, and all hours of work actually performed (including voluntary work over 8 hours in a workday or on the worker's Sabbath or Federal holidays), may be counted by the employer in calculating whether the period of guaranteed employment has been met. 20 CFR 655.122(i).

If the worker is paid on a piece rate basis, the employer agrees to use the worker's average hourly piece rate earnings or the required hourly wage rate, whichever is higher, to calculate the amount due under the three-fourths guarantee. 20 CFR 655.122(i).



H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor

If the worker voluntarily abandons employment before the end of the period of employment set forth in the job order, or is terminated for cause, and the employer follows the notification requirements in 20 CFR 655.122(n), the worker is not entitled to the three-fourths guarantee. The employer is not liable for payment of the three-fourths guarantee to an H-2A worker whom the Department of Labor certifies is displaced due to the employer's requirement to hire qualified and available U.S. workers during the recruitment period set out in 20 CFR 655.135(d), which lasts until 50 percent of the period of the work contract has elapsed (50 percent rule). 20 CFR 655.122(i).

**Important Note:** In circumstances where the work contract is terminated due to contract impossibility under 20 CFR 655.122(o), the three-fourths guarantee period ends on the date of termination.

9. **EARNINGS RECORDS:** Employer agrees to keep accurate and adequate records with respect to the workers' earnings at the place or places of employment, or at one or more established central recordkeeping offices where such records are customarily maintained. The records must include each worker's permanent address, and, when available, permanent email address, and phone number(s). All records must be available for inspection and transcription by the Department of Labor or a duly authorized and designated representative, and by the worker and representatives designated by the worker as evidenced by appropriate documentation. Where the records are maintained at a central recordkeeping office, other than in the place or places of employment, such records must be made available for inspection and copying within 72 hours following notice from the Department of Labor, or a duly authorized and designated representative, and by the worker and designated representatives. The content of earnings records must meet all regulatory requirements and be retained by the employer for a period of not less than 3 years after the date of certification by the Department of Labor. 20 CFR 655.122(j).

10. **HOURS AND EARNINGS STATEMENTS:** Employer agrees to furnish to the worker on or before each payday in one or more written statements the following information: (1) the worker's total earnings for the pay period; (2) the worker's hourly rate and/or piece rate of pay; (3) the hours of employment offered to the worker (showing offers in accordance with the three-fourths guarantee as determined in 20 CFR 655.122(i), separate from any hours offered over and above the guarantee); (4) the hours actually worked by the worker; (5) an itemization of all deductions made from the worker's wages; (6) if piece rates are used, the units produced daily; (7) beginning and ending dates of the pay period; and (8) the employer's name, address and FEIN. 20 CFR 655.122(k).

For workers engaged in the herding or production of livestock on the range, the employer is exempt from recording and furnishing the hours actually worked each day, the time the worker begins and ends each workday, as well as the nature and amount of work performed, but otherwise must comply with the earnings records and hours and earnings statement requirements set out in 20 CFR 655.122(j) and (k). The employer agrees to keep daily records indicating whether the site of the employee's work was on the range or off the range. If the employer prorates a worker's wage because of the worker's voluntary absence for personal reasons, it must also keep a record of the reason for the worker's absence. 20 CFR 655.210(f).

11. **RATES OF PAY:** The employer agrees that it will offer, advertise in its recruitment, and pay at least the Adverse Effect Wage Rate (AEWR), a prevailing wage rate, the agreed-upon collective bargaining rate, the Federal minimum wage, or the State minimum wage, whichever is highest, for every hour or portion thereof worked during a pay period. If the offered wage(s) disclosed in this clearance order is/are based on commission, bonuses, or other incentives, the employer guarantees the wage paid on a weekly, semi-monthly, or monthly basis will equal or exceed the AEWR, prevailing wage rate, Federal minimum wage, State minimum wage, or any agreed-upon collective bargaining rate, whichever is highest. If the applicable AEWR or prevailing wage is adjusted during the contract period, and that new rate is higher than the highest of the AEWR, the prevailing wage, the collective bargaining rate, the Federal minimum wage, or the State minimum wage, the employer will increase the pay of all employees in the same occupation to the higher rate no later than the effective date of the adjustment. If the new AEWR or prevailing wage is lower than the rate guaranteed on this job order, the employer will continue to pay at least the rate guaranteed on this job order.

If the worker is paid on a piece rate basis, the piece rate must be no less than the prevailing piece rate for the crop activity or agricultural activity and, if applicable, a distinct work task or tasks performed in that activity in the geographic area, if one has been issued. At the end of the pay period, if the piece rate does not result in average hourly piece rate earnings during the pay period at least equal to the amount the worker would have earned had the worker been paid at the appropriate hourly rate, the employer agrees to supplement the worker's pay at that time so that the worker's earnings are at least as much as the worker would have earned during the pay period if the worker had instead been paid at the appropriate hourly wage rate for each hour worked. 20 CFR 655.120, 655.122(l).

For workers engaged in the herding or production of livestock on the range, the employer agrees to pay the worker at least the monthly AEWR, the agreed-upon collective bargaining wage, or the applicable minimum wage imposed by Federal or State law or judicial action, in effect at the time work is performed, whichever is highest, for every month of the job order period or portion thereof. If the offered wage disclosed in this clearance order is based on commissions, bonuses, or other incentives, the employer guarantees that the wage paid will equal or exceed the monthly AEWR, the agreed-upon collective bargaining wage, or the applicable minimum wage imposed by Federal or State law or judicial action, whichever is highest, and will be paid to each worker free and clear without any unauthorized deductions. The employer may prorate the wage for the initial and final pay periods of the job order period if its pay period does not match the beginning or ending dates of the job order. The employer also may prorate the wage if an employee is voluntarily unavailable to work for personal reasons. 20 CFR 655.210(g).

12. **FREQUENCY OF PAY:** Employer agrees to pay workers when due based on the frequency disclosed in this clearance order. 20 CFR 655.122(m).
13. **ABANDONMENT OF EMPLOYMENT OR TERMINATION FOR CAUSE:** If a worker voluntarily abandons employment before the end of the contract period, or is terminated for cause, the employer is not responsible for providing or paying for the subsequent transportation and subsistence expenses of that worker, and that worker is not entitled to the three-fourths guarantee, if the employer notifies the U.S. Department of Labor and, if applicable, the Department of Homeland Security, in writing or by any other method specified by the Department of Labor or the Department of Homeland Security in the *Federal Register*, not later than 2 working days after the abandonment or termination occurs. A worker will be deemed to have abandoned the work contract after the worker fails to show up for work at the regularly scheduled time for 5 consecutive work days without the consent of the employer. 20 CFR 655.122(n).
14. **CONTRACT IMPOSSIBILITY:** The work contract may be terminated before the end date of work specified in the work contract if the services of the workers are no longer required for reasons beyond the control of the employer due to fire, weather, or other Act of God that makes fulfillment of the contract impossible, as determined by the Department of Labor. In the event that the work contract is terminated, the employer agrees to fulfill the three-fourths guarantee for the time that has elapsed from the start date of work specified in the work contract to the date of termination. The employer also agrees that it will make efforts to transfer the worker to other comparable employment acceptable



H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor

to the worker and consistent with existing immigration laws. In situations where a transfer is not affected, the employer agrees to return the worker at the employer's expense to the place from which the worker, disregarding intervening employment, came to work for the employer, or transport the worker to his/her next certified H-2A employer, whichever the worker prefers. The employer will also reimburse the worker the full amount of any deductions made by the employer from the worker's pay for transportation and subsistence expenses to the place of employment. The employer will also pay the worker for any transportation and subsistence expenses incurred by the worker to that employer's place of employment. The amounts the employer will pay for subsistence expenses per day are those amounts disclosed in this clearance order. The amount of the transportation payment must not be less (and is not required to be more) than the most economical and reasonable common carrier transportation charges for the distances involved. 20 CFR 655.122(o).

The employer is not required to pay for transportation and daily subsistence from the place of employment to a subsequent employer's place of employment if the worker has contracted with a subsequent employer who has agreed to provide or pay for the worker's transportation and subsistence expenses from the present employer's place of employment to the subsequent employer's place of employment. 20 CFR 655.122(h)(2).

15. **DEDUCTIONS FROM WORKER'S PAY:** Employer agrees to make all deductions from the worker's paycheck required by law. This job offer discloses all deductions not required by law which the employer will make from the worker's paycheck and all such deductions are reasonable, in accordance with 20 CFR 655.122(p) and 29 CFR part 531. The wage requirements of 20 CFR 655.120 will not be met where undisclosed or unauthorized deductions, rebates, or refunds reduce the wage payment made to the employee below the minimum amounts required under 20 CFR part 655, subpart B, or where the employee fails to receive such amounts free and clear because the employee kicks back directly or indirectly to the employer or to another person for the employer's benefit the whole or part of the wage delivered to the employee. 20 CFR 655.122(p).
16. **DISCLOSURE OF WORK CONTRACT:** Employer agrees to provide a copy of the work contract to an H-2A worker no later than the time at which the worker applies for the visa, or to a worker in corresponding employment no later than on the day work commences. For an H-2A worker coming to the employer from another H-2A employer or who does not require a visa for entry to the United States, the employer agrees to provide a copy of the work contract no later than the time an offer of employment is made to the H-2A worker. A copy of the work contract will be provided to each worker in a language understood by the worker, as necessary or reasonable. In the absence of a separate, written work contract entered into between the employer and the worker, the work contract at minimum will be the terms of this clearance order, including all Addenda, the certified *H-2A Application for Temporary Employment Certification* and any obligations required under 8 U.S.C. 1188, 29 CFR part 501, or 20 CFR part 655, subpart B. 20 CFR 655.122(q).
17. **ADDITIONAL ASSURANCES FOR CLEARANCE ORDERS:**
- A. Employer agrees to provide to workers referred through the clearance system the number of hours of work disclosed in this clearance order for the week beginning with the anticipated first date of need, unless the employer has amended the first date of need at least 10 business days before the original first date of need by so notifying the Order-Holding Office (OHO) in writing (e.g., email notification). The employer understands that it is the responsibility of the SWA to make a record of all notifications and attempt to inform referred workers of the amended first date of need expeditiously. 20 CFR 653.501(c)(3)(i).
- If there is a change to the anticipated first date of need, and the employer fails to notify the OHO at least 10 business days before the original first date of need, the employer agrees that it will pay eligible workers referred through the clearance system the specified rate of pay disclosed in this clearance order for the first week starting with the originally anticipated first date of need or will provide alternative work if such alternative work is stated on the clearance order. 20 CFR 653.501(c)(3)(5).
- B. Employer agrees that no extension of employment beyond the period of employment specified in the clearance order will relieve it from paying the wages already earned, or if specified in the clearance order as a term of employment, providing transportation from the place of employment, as described in paragraph 7.B above. 20 CFR 653.501(c)(3)(ii).
- C. Employer assures that all working conditions comply with applicable Federal and State minimum wage, child labor, social security, health and safety, farm labor contractor registration, and other employment-related laws. 20 CFR 653.501(c)(3)(iii).
- D. Employer agrees to expeditiously notify the OHO or SWA by emailing and telephoning immediately upon learning that a crop is maturing earlier or later, or that weather conditions, over-recruitment, or other factors have changed the terms and conditions of employment. 20 CFR 653.501(c)(3)(iv).
- E. If acting as a farm labor contractor (FLC) or farm labor contractor employee (FLCE) on this clearance order, the employer assures that it has a valid Federal FLC certificate or Federal FLCE identification card and when appropriate, any required State FLC certificate. 20 CFR 653.501(c)(3)(v).
- F. Employer assures that outreach workers will have reasonable access to the workers in the conduct of outreach activities pursuant to 20 CFR 653.107. 20 CFR 653.501(c)(3)(vii).

*I declare under penalty of perjury that I have read and reviewed this clearance order, including every page of this Form ETA-790A and all supporting addendums, and that to the best of my knowledge, the information contained therein is true and accurate. This clearance order describes the actual terms and conditions of the employment being offered by me and contains all the material terms and conditions of the job. 20 CFR 653.501(c)(3)(viii). I understand that to knowingly furnish materially false information in the preparation of this form and/or any supplement thereto or to aid, abet, or counsel another to do so is a federal offense punishable by fines, imprisonment, or both. 18 U.S.C. §§ 2, 1001.*

|                                       |                                   |                          |
|---------------------------------------|-----------------------------------|--------------------------|
| 1. Last (family) name *<br>Lewis, Jr. | 2. First (given) name *<br>Calvin | 3. Middle initial §<br>E |
| 4. Title *<br>President               |                                   |                          |

H-2A Agricultural Clearance Order  
Form ETA-790A  
U.S. Department of Labor



|                                                                                                                  |                              |
|------------------------------------------------------------------------------------------------------------------|------------------------------|
| 5. Signature (or digital signature) *<br>Digital Signature Verified and Retained<br>By <i>Certifying Officer</i> | 6. Date signed *<br>2/7/2024 |
|------------------------------------------------------------------------------------------------------------------|------------------------------|

For Public Burden Statement, see the Instructions for Form ETA-790/790A.

H-2A Agricultural Clearance Order  
Form ETA-790A Addendum A  
U.S. Department of Labor



**A.9. Additional Crop or Agricultural Activities and Wage Offer Information**

| Crop ID | Crop or Agricultural Activity           | Wage Offer | Per        | Piece Rate Units / Estimated Hourly Rate / Special Pay Information                                                                                                                                                                                                                   |
|---------|-----------------------------------------|------------|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|         | Strawberry, hand-harvest                | \$ 01 75   | Piece Rate | Per 8-1# clamshells or 4-2# clamshells or 12-1 pint containers or 6-1 quart containers or equivalent. Estimated hourly wage rate equivalent is \$15.75 based on average 9 piece rate units per hour. Actual piece rate earnings depend on individual factors. Guaranteed \$15.81/hr. |
|         | Blackberry, hand-harvest                | \$ 03 00   | Piece Rate | Per 12-6 oz clamshells or equivalent. Estimated hourly wage rate equivalent is \$15 based on average 5 piece rate units per hour. Actual piece rate earnings depend on individual factors. Guaranteed \$15.81/hr.                                                                    |
|         | Blackberry, hand-harvest                | \$ 04 00   | Piece Rate | Per 12-10 oz clamshells or equivalent. Estimated hourly wage rate equivalent is \$16 based on average 4 piece rate units per hour. Actual piece rate earnings depend on individual factors. Guaranteed \$15.81/hr.                                                                   |
|         | Blackberry, hand-harvest                | \$ 04 25   | Piece Rate | Per 12-12 oz clamshells or equivalent. Estimated hourly wage rate equivalent is \$17 based on average 4 piece rate units per hour. Actual piece rate earnings depend on individual factors. Guaranteed \$15.81/hr.                                                                   |
|         | Blackberry, hand-harvest                | \$ 04 75   | Piece Rate | Per 8-18 oz clamshells or equivalent. Estimated hourly wage rate equivalent is \$19 based on average 4 piece rate units per hour. Actual piece rate earnings depend on individual factors. Guaranteed \$15.81/hr.                                                                    |
|         | Berry worker, all other crop activities | \$ 15 81   | Hour       |                                                                                                                                                                                                                                                                                      |
|         |                                         | \$ .       |            |                                                                                                                                                                                                                                                                                      |
|         |                                         | \$ .       |            |                                                                                                                                                                                                                                                                                      |
|         |                                         | \$ .       |            |                                                                                                                                                                                                                                                                                      |
|         |                                         | \$ .       |            |                                                                                                                                                                                                                                                                                      |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum B  
U.S. Department of Labor

| 1. Type of Housing *                                                                                              | 2. Physical Location *                                                        | 3. Additional Housing Information § | 4. Total Units * | 5. Total Occupancy * | 6. Inspection Entity *                                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------|------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S23546--360 Neck Farm Rd<br>Rocky Point, North Carolina 28457<br>PENDER       |                                     | 1                | 20                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S31422--285 Neck Farm Rd<br>Rocky Point , North Carolina 28457<br>PENDER      |                                     | 1                | 20                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S2510--410 Neck Farm Rd<br>Rocky Point, North Carolina 28457<br>PENDER        |                                     | 1                | 48                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S37842--350 Neck Farm Rd<br>Rocky Point, North Carolina 28457<br>PENDER       |                                     | 1                | 20                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S15414--155, 157, 159 Blair Farm Rd<br>Currie, North Carolina 28435<br>PENDER |                                     | 1                | 60                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |

For Public Burden Statement, see the Instructions for Form ETA-790/790A.



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum B  
U.S. Department of Labor

| 1. Type of Housing *                                                                                              | 2. Physical Location *                                                   | 3. Additional Housing Information § | 4. Total Units * | 5. Total Occupancy * | 6. Inspection Entity *                                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------|------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S15413--151, 153 Blair Farm Rd<br>Currie, North Carolina 28435<br>PENDER |                                     | 2                | 40                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S11612--631 Blair Farm Rd<br>Currie, North Carolina 28435<br>PENDER      |                                     | 1                | 44                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S11613--608 Blair Farm Rd<br>Currie, North Carolina 28435<br>PENDER      |                                     | 1                | 48                   | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S11283--570 Blair Farm Rd<br>Currie, North Carolina 28435<br>PENDER      |                                     | 1                | 6                    | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S11284--7160 US Hwy 421<br>Currie, North Carolina 28435<br>PENDER        |                                     | 1                | 6                    | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other _____ |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum B  
U.S. Department of Labor

| 1. Type of Housing *                                                                                              | 2. Physical Location *                                               | 3. Additional Housing Information § | 4. Total Units * | 5. Total Occupancy * | 6. Inspection Entity *                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------|------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S11285--7156 Hwy 421<br>Currie, North Carolina<br>28435<br>PENDER    |                                     | 1                | 6                    | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other<br>_____ |
| <input checked="" type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations | S11286--7162 US Hwy 421<br>Currie, North Carolina<br>28435<br>PENDER |                                     | 1                | 6                    | <input type="checkbox"/> Local authority<br><input checked="" type="checkbox"/> SWA<br><input checked="" type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other<br>_____ |
| <input type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations            |                                                                      |                                     |                  |                      | <input type="checkbox"/> Local authority<br><input type="checkbox"/> SWA<br><input type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other<br>_____                       |
| <input type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations            |                                                                      |                                     |                  |                      | <input type="checkbox"/> Local authority<br><input type="checkbox"/> SWA<br><input type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other<br>_____                       |
| <input type="checkbox"/> Employer-provided<br><input type="checkbox"/> Rental or public accommodations            |                                                                      |                                     |                  |                      | <input type="checkbox"/> Local authority<br><input type="checkbox"/> SWA<br><input type="checkbox"/> Other State authority<br><input type="checkbox"/> Federal authority<br><input type="checkbox"/> Other<br>_____                       |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor

**H. Additional Material Terms and Conditions of the Job Offer**

*a. Job Offer Information 1*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      |                                                                |            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties |
| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b></p> <p>Berry Pickers: Hand-harvest strawberries, blueberries, and blackberries. Duties may include cleaning, field-packing and loading harvested berries. Field grade, sort, or classify berries by size, weight, color, or condition. May work in packing shed on the farm. May operate forklift or electric pallet jack to unload and load berries. Prolonged walking, standing, bending, stooping, and reaching. Workers may be requested to submit to random drug or alcohol tests at no cost to the worker. Failure to comply with the request or testing positive may result in immediate termination. All testing will occur post-hire and is not a part of the interview process. Negative result may be required post-hire and before commencing work. Must be able to lift 75 lbs. to shoulder height repetitively throughout the workday and able to lift and carry 75 lbs. in field. Must not hinder another worker's productivity. Use of personal cell phone or other personal electronic device during working hours strictly prohibited except for work-related calls or emergencies and violation may result in immediate termination. Requires one month verifiable work experience hand-harvesting strawberries, blueberries, and blackberries. Must commit to entire anticipated period of employment.</p> <p>Strawberries: Workers will bend and stoop to pick strawberries according to size, color, shape and degree of maturity and place into field containers. Workers will be expected to pick fully ripe strawberries, discard any cat-faced, deformed, decayed or undersized berries according to supervisor's instructions. Also, workers must carefully remove any undesirable berries from plant that would later cause fungi to attack the plant. Workers may carry full container weighing approximately twenty-five (25) lbs. and empty into field bin or load onto trailer. In some instances workers will be expected to fill a 4-quart/one gallon plastic pail, carefully filling the pail to capacity. (Buckets must be full for correct measure and weight) When full, baskets will be carried 2 or 3 per hand, by the wire handles, nestled to avoid bruising or spillage to end of rows at designated truck-loading place. Then the buckets of berries will be inspected for quality and loaded for transportation to roadside market or coolers. Employees will take turns transporting berries to the coolers, but must transport all fruit at least hourly. Depending on market demand, workers may also be required to pick strawberries in cups and/or flats. Strawberries harvested specifically for sale at a roadside stand as fresh market specialty basket containers must be field graded. For berries harvested for sale at roadside stands, extra care must be used to ensure that each strawberry is undamaged and perfect. All berries must be handled carefully to prevent bruises or fingernail cuts. Pickers will take extreme care not to damage the delicate berries. Quality and workmanship is of the utmost importance.</p> <p>Blackberries: This is a very difficult, scratchy job as these are thorny blackberries. Harvest is a difficult, painful job that requires constantly reaching into thorny blackberry plants. Necessary manual dexterity precludes wearing gloves. And significant briar scratches are normal complications. Workers must be diligent to avoid natural complications related to natural hazards, including poison oak, chiggers, and snakes. Workers will bend and stoop to pick blackberries according to size, color, shape and degree of maturity and place into field containers. Workers will be expected to pick fully ripe blackberries, discard any deformed, decayed or undersized berries according to supervisor's instructions. Also, workers must carefully remove any undesirable berries from plant that would later cause fungi to attack the plant. Workers will carry 2 full containers with 6,2 qt. baskets in each weighing approximately 12 lbs. each to the field trailer. Workers will properly fill all 2 qt baskets.</p> |      |                                                                |            |

*b. Job Offer Information 2*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |                                                                |                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|---------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | A.11 | 2. Name of Section or Category of Material Term or Condition * | Deductions from Pay |
| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b></p> <p>The employer will make the following deductions from the worker's wages: FICA, Medicare and income taxes as required by law (unlike U.S. workers, foreign H-2A workers are not subject to payroll tax deductions for FICA, Medicare or federal withholding.); cash advances and repayment of loans; repayment of overpayment of wages to the worker; recovery of any loss to the employer due to the worker's damage, beyond normal wear and tear, or loss of equipment or housing items where it is shown that the worker is responsible. No deduction not required by law will be made that brings the worker's hourly earnings below the higher of the federal minimum wage and State minimum wage.</p> |      |                                                                |                     |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**

H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor



**H. Additional Material Terms and Conditions of the Job Offer**

*c. Job Offer Information 3*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |                                                                |                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------------|------------------------------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>B.6</b> | 2. Name of Section or Category of Material Term or Condition * | Additional Information Regarding Job Qualifications/Requirements |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *<br>Prolonged walking, standing, bending, stooping, and reaching. Workers may be requested to submit to random drug or alcohol tests at no cost to the worker. Failure to comply with the request or testing positive may result in immediate termination. All testing will occur post-hire and is not a part of the interview process. Negative result may be required post-hire and before commencing work. Must be able to lift 75 lbs. to shoulder height repetitively throughout the workday and able to lift and carry 75 lbs. in field. Must not hinder another workers productivity. Use of personal cell phone or other personal electronic device during working hours strictly prohibited except for work-related calls or emergencies and violation may result in immediate termination. Requires one month verifiable work experience hand-harvesting strawberries, blueberries, and blackberries. Must commit to entire anticipated period of employment. |            |                                                                |                                                                  |

*d. Job Offer Information 4*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |             |                                                                |                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------|--------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>D.10</b> | 2. Name of Section or Category of Material Term or Condition * | Additional Housing Information |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *<br>Housing is group housing. If a female worker is hired, separate toilet, shower, and sleeping room will be provided. Family housing is not available and the provision of family housing is not a prevailing practice in the area of intended employment. La vivienda es para grupo. Si se contrata a una trabajadora, se proporcionarn bao, ducha y habitacin separadas. Vivienda para toda la familia no es disponible y la provisin de casa para toda una familia no es imperante para el rea de traba |             |                                                                |                                |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor

**H. Additional Material Terms and Conditions of the Job Offer**

*e. Job Offer Information 5*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            |                                                                |                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------------|-----------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>G.1</b> | 2. Name of Section or Category of Material Term or Condition * | <b>Referral and Hiring Instructions</b> |
| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b></p> <p>All interested local and intrastate candidates should contact their nearest career center for pre-employment screening before contacting the employer. Career center staff may only refer candidates who have been apprised of all the material terms and conditions of employment and have indicated, by accepting referral to the job opportunity, that he or she is qualified, able, willing, and available for employment. Career center staff should fax or email a referral card containing the referral candidates name, address and telephone number to employer first, then instruct the candidate to call the employer directly to schedule a personal interview. Hours for referral candidate to call the employer are 9:00 a.m. to 1:00 p.m., Monday-Friday, excluding all federal holidays. Referral candidates MUST call the employer and schedule an interview appointment prior to coming. No referral candidate is to go to the employers address or work site without a scheduled interview appointment. Candidates recruited from outside normal commuting distance are not required to appear in person for interview. Employer may schedule telephone interview appointments to candidates recruited from outside normal commuting distance. All interstate applicants interested in this job offer should first contact the nearest career center in their state. Career center staff should contact the North Carolina Department of Commerce, Division of Workforce Solutions Ag Services in Raleigh, North Carolina at (984) 236-4227 prior to contacting the employer. Workers should be fully apprised by the local employment office of the terms, conditions and nature of employment prior to referral. Workers recruited against the job offer from within normal commuting distance will not be provided housing, subsistence or transportation. All workers hired under this job order will be required to provide documentation attesting to legal status to work in the United States. All applicants must be able (with or without reasonable accommodation), willing, and qualified to perform all the work described, and must be available for the entire anticipated period of employment. There is no offer or guarantee to be recalled for future employment except for the required solicitation of certain former U.S. workers in compliance with 20 CFR 655.153.</p> <p>Employer in its discretion may offer a higher wage rate or bonus to a worker employed under this job order due to work performance, skill or tenure. El empleador, a su discrecin, puede ofrecer una tasa salarial ms alta o un bono a un trabajador empleado bajo esta orden de trabajo debido a su desempeo laboral, habilidad o tenencia.</p> |            |                                                                |                                         |

*f. Job Offer Information 6*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            |                                                                |                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------------|----------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>F.2</b> | 2. Name of Section or Category of Material Term or Condition * | <b>Inbound/Outbound Transportation</b> |
| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b></p> <p>Inbound transportation and subsistence will be reimbursed at the end of the first work week. The employer will provide or pay for charter bus or van or other modes of inbound and outbound transportation to groups of workers, or permit workers to select any means of transportation they choose and reimburse workers at no less than the most economical and reasonable common carrier transportation charges for the distances involved. Mode of transportation to be arranged by the employer is unknown.</p> |            |                                                                |                                        |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**

H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor



**H. Additional Material Terms and Conditions of the Job Offer**

*g. Job Offer Information 7*

|                                                                                                                                                                                                                                                                                                                                             |            |                                                                |                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------------|---------------------------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                    | <b>F.1</b> | 2. Name of Section or Category of Material Term or Condition * | <b>Daily Transportation - Daily transportation in spanish</b> |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *                                                                                                                                                                                                                                                                |            |                                                                |                                                               |
| <p>El empleador ofrecer transporte voluntario sin costo a aquellos trabajadores que vivan en viviendas proporcionadas por el empleador y a los trabajadores que se presenten diariamente en un sitio designado para reportar su trabajo. El medio de transporte podr ser mediante 4 autobuses cada uno con capacidad para 44 pasajeros.</p> |            |                                                                |                                                               |

*h. Job Offer Information 8*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |             |                                                                |                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------|---------------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>A.11</b> | 2. Name of Section or Category of Material Term or Condition * | <b>Pay Deductions - Pay Deductions in Spanish</b> |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                |                                                   |
| <p>El empleador har las siguientes deducciones de los salarios de los trabajadores: FICA, Medicare y impuestos como lo requiere la ley; adelantos en efectivo y pago de los prstamos (A diferencia de los trabajadores estadounidenses, los trabajadores extranjeros H-2A no estn sujetos a deducciones de impuestos sobre la nmina por FICA, Medicare o retenciones federales.); reembolso del pago en exceso de los salarios a los trabajadores; recuperacin de cualquier prdida para el empleador debido a los daos del trabajador, ms all del desgaste normales y rotura o prdida de equipos o elementos de vivienda, donde se muestra que el trabajador es responsable. No deduccin no requiere que la ley se har que trae ingresos por hora de los trabajadores por debajo de la ms alta del salario mnimo federal y el salario mnimo estatal.</p> |             |                                                                |                                                   |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**

H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor



**H. Additional Material Terms and Conditions of the Job Offer**

i. Job Offer Information 9

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                                                |                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>F.2</b> | 2. Name of Section or Category of Material Term or Condition * | Inbound/Outbound Transportation - Inbound/Outbound Transportation continued and in Spanish |
| 3. Details of Material Term or Condition (up to 3,500 characters) *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |                                                                |                                                                                            |
| <p>These arrangements apply only to workers who are recruited from outside the area of intended employment.</p> <p>El transporte entrante y las dietas se reembolsarn al final de la primera semana laboral. El empleador proporcionar o pagar los servicios de alquiler de autobuses o camionetas u otros modos de transporte de entrada y salida para grupos de trabajadores, o permitir que los trabajadores seleccionen cualquier medio de transporte que elijan y reembolsar a los trabajadores a no menos de los cargos de transporte comn ms econmicos y razonables para las distancias involucradas. Se desconoce el modo de transporte que organizar el empleador. Estos arreglos se aplican solo a los trabajadores que son contratados fuera del rea de empleo previsto.</p> |            |                                                                |                                                                                            |

j. Job Offer Information 10

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |                                                                |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------|-------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>A.8a</b> | 2. Name of Section or Category of Material Term or Condition * | Job Duties - More Details about Pay |
| 3. Details of Material Term or Condition (up to 3,500 characters) *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                                                                |                                     |
| <p>To the extent there is any discrepancy between this Form ETA-790A, the Immigration and Nationality Act (the ?INA?), and any applicable H-2A regulations, then the INA and the applicable H-2A Regulations shall control. Employer in its discretion may offer a higher wage rate or bonus to a worker employed under this job order due to work performance, skill or tenure. En la medida en que hay alguna discrepancia entre este ETA Formulario 790A, la Ley de Inmigracin y Nacionalidad (el "INA") y todos los reglamentos de H-2A aplicables, a continuacin, el INA y los reglamentos H-2A aplicables siempre prevalecern. El empleador, a su discrecin, puede ofrecer una tasa salarial ms alta o un bono a un trabajador empleado bajo esta orden de trabajo debido a su desempeo laboral, habilidad o tenencia.</p> |             |                                                                |                                     |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**

H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor



**H. Additional Material Terms and Conditions of the Job Offer**

k. Job Offer Information 11

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |                                                                |                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|---------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Terminations |
| 3. Details of Material Term or Condition (up to 3,500 characters) *<br>TERMINATIONS: The employer may terminate the worker with notification to the appropriate State and federal agencies if the worker: (a) refuses without justified cause to perform work for which the worker was recruited and hired; (b) commits serious acts of misconduct; (c) hinders another worker's productivity; (d) malingers or otherwise refuses without justified cause to perform as directed the work for which the worker was recruited and hired; (e) provides other lawful job-related reason(s) for termination of employment; (f) abandons employment; (g) fails to meet applicable production standards when production standards are applicable; (h) falsifies identification, personnel, medical, production, or other work-related records; (i) fails or refuses to take an alcohol or drug test; (j) employer discovers a criminal conviction record or status as a registered sex offender that employer reasonably believes will impair the safety and/or living conditions of other workers; (k) commits an act or acts of insubordination, including the failure to regard employer's authority; (l) lies or provides a false statement to the employer; (m) collects any money or other thing of value from prospective employees or current employees in order for the payor to work for this employer; (n) violation of employer's safety rules; (o) unauthorized or illegal possession, use or sale of alcohol or controlled substances on employer's premises or during working hours, while engaged in work activities or in employer's vehicles; (p) unauthorized or illegal possession, use or sale of weapons, firearms, or explosives on employer's premises or in employer's vehicles; (q) theft or dishonesty; (r) inappropriate physical contact; (s) harassment; (t) discrimination or retaliation; (u) disrespect toward fellow workers, visitors or other members of the public; (v) performing outside work or use of employer's property, equipment or facilities in connection with outside work while on employer's time; (w) poor attendance or poor performance. The grounds for immediate termination listed above are not all inclusive. All termination decisions will be based on an assessment of all relevant factors |      |                                                                |                           |

l. Job Offer Information 12

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                |                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|--------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Terminations in Spanish |
| 3. Details of Material Term or Condition (up to 3,500 characters) *<br>TERMINACIONES: El empleador puede dar por terminado el trabajador con notificacin a las agencias estatales y federales correspondientes si el trabajador: (a) se niega sin causa justificada para realizar el trabajo para el cual fue reclutado y contratado al trabajador; (b) comete actos graves de mala conducta; (c) dificulta la productividad de otro trabajador; (d) el que no este enfermo o no se niega, sin causa justificada para realizar segn las indicaciones de la obra para la cual fue contratado y contrat al trabajador; (e) proporciona otra razn relacionada con el trabajo legal (s) para la terminacin del empleo; (f) abandona su empleo; (g) no cumple las normas de produccin aplicables cuando las normas de produccin aplicables; (h) falsifica identificacin, personal, mdicos, produccin, u otros registros relacionados con el trabajo; (i) no presenta o rehosa a tomar una prueba de alcohol o drogas; (j) el empleador descubre un registro condena penal o el estado como delincuente sexual registrado que el empleador cree razonablemente perjudicar la seguridad y/o de las condiciones de vida de los dems trabajadores; (k) comete un acto o actos de insubordinacin, incluyendo el hecho de no considerar a la autoridad del empleador; (l) se encuentra o proporciona una declaracin falsa al empleador; (m) recoge dinero u otra cosa de valor a partir de los futuros empleados o empleados actuales a fin de que el pagador de trabajar para este empleador; (n) la violacin de las reglas de seguridad del empleador; (o) no autorizada o ilegal la posesin, uso o venta de alcohol o sustancias controladas en los locales del empleador o durante la jornada laboral, en el ejercicio de las actividades de trabajo o en vehculos del empleador; (p) no autorizada o ilegal la posesin, uso o venta de armas, armas de fuego o explosivos en las instalaciones del empleador o en vehculos del empleador; (q) el robo o la deshonestidad; (r) de contacto fsico inapropiado; (s) el acoso; (t) la discriminacin o represalia; (u) la falta de respeto hacia los compaeros de trabajo, visitantes u otros miembros del pblico; (v) la realizacin de trabajos fuera o utilizacin de bienes, equipos o instalaciones del empleador en relacin con el trabajo fuera, mientras que en el tiempo del empleador; (w) pobre asistencia o mal desempeo. Los motivos para la terminacin inmediata mencionados no son todo incluido. Todas las decisiones de terminacin se basarn en una evaluacin de todos los factores pertinentes. |      |                                                                |                                      |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor

**H. Additional Material Terms and Conditions of the Job Offer**

m. Job Offer Information 13

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |                                                                |                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Prohibited Fees |
| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b><br/>PROHIBITIONS AGAINST EMPLOYEES PAYING FEES: The employer and its agents have not sought or received payment of any kind from any employee subject to 8 U.S.C. 1188 for any activity related to obtaining H-2A labor certification, including payment of the employer's attorneys' fees, application fees, or recruitment costs, as prohibited by 20 CFR 655.135(j). Costs that are the responsibility and primarily for the benefit of the worker, such as government-required passport fees, are not included in this prohibition. PROHIBICIONES CONTRA QUE EMPLEADOS PAGEN QUOTAS: El empleador y sus agentes no han solicitado o recibido pago de cualquier tipo de cualquier empleado sujeto a 8 USC 1188 para cualquier actividad relacionada con la obtención de la certificación de trabajo H-2A, incluyendo el pago de honorarios de abogados del empleador", las tasas de solicitud, o los costos de contratación, que está prohibido por 20 CFR 655.135 (j). Los costos que son la responsabilidad y sobre todo en beneficio del trabajador, tales como honorarios de pasaporte requerido por el gobierno, no están incluidos en esta prohibición.</p> <p>CONTRACTS WITH THIRD PARTIES COMPLY WITH PROHIBITIONS: The employer has contractually forbidden any foreign labor contractor or recruiter, if any, whom the employer engages, either directly or indirectly, in international recruitment of H-2A applicants to seek or receive payments from prospective employees, except as provided for in Department of Homeland Security regulations at 8 CFR 214.2(h)(5)(xi)(A). Likewise, all employees are prohibited from collecting any money or other thing of value from prospective employees or current employees in order for the payor to work for the employer. This employer has zero tolerance for prohibited payments. Employees should report to the employer immediately the name of any person seeking to collect a prohibited payment and the amount sought. Any employee found to have collected a prohibited payment will be required to reimburse the injured party immediately and will be terminated from employment. An employee cannot be discriminated against or discharged for reporting a prohibited payment. CONTRATOS CON GRUPOS QUE CUMPLEN CON PROHIBICIONES: El empleador ha prohibido por contrato cualquier contratista laboral extranjero o reclutador, en su caso, a quien el empleador se involucra, ya sea directa o indirectamente, en la contratación internacional de los solicitantes de H-2A para buscar o recibir pagos de los futuros empleados, con excepción de lo previsto en el reglamento del Departamento de Seguridad Nacional a las 8 CFR 214.2(h)(5)(xi)(A). Del mismo modo, todos los empleados se les prohíbe la recogida de dinero u otra cosa de valor a partir de los futuros empleados o empleados actuales a fin de que el pagador de trabajar para el empleador. Este patrón tiene cero tolerancia para los pagos prohibidos. Los empleados deben informar al empleador inmediatamente el nombre de cualquier persona que busca para recoger un pago prohibido y la cantidad solicitada. Cualquier empleado que haya recogido se requerir un pago prohibido a reembolsar a la parte perjudicada de inmediato y se dar por terminado de empleo. Un empleado no puede ser objeto de discriminación o se descarta por informar de un pago prohibido.</p> |      |                                                                |                              |

n. Job Offer Information 14

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |                                                                |                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Job duties in Spanish |
| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b><br/>Recolectores de bayas: Cosechar fresas y arándanos y moras negro a mano. Las tareas pueden incluir la limpieza, embalaje y carga bayas cosechadas. El grado de campo, ordenar o clasificar las bayas por tamaño, peso, color o condición. Puede trabajar en el cobertizo de empacadora en la granja. Puede operar montacargas o transpaletas eléctricas para descargar y cargar bayas. Se prolongada estar de pie, agacharse, doblarse y alcanzar. El trabajo continúa al aire libre y en todo tipo de clima. Se prohíbe el uso o posesión o estar bajo la influencia de alcohol o drogas ilegales durante el tiempo de trabajo. Los trabajadores pueden ser solicitados a someterse a pruebas de drogas al azar o alcohol, sin costo alguno para el trabajador. El incumplimiento de la solicitud o de dar prueba positiva puede resultar en la terminación inmediata. Todas las pruebas ocurrirán después de ser contratado y no es una parte del proceso de la entrevista. Se requieren resultados negativos antes de comenzar a trabajar. Debe ser capaz de levantar 75 libras a la altura del hombro repetidamente durante toda la jornada y fiable para levantar y transportar 75 libras en el campo. No debe obstaculizar la productividad de otro trabajador. El uso del teléfono celular personal o otro electrónico durante las horas de trabajo es estrictamente prohibido excepto para llamadas o emergencias relacionadas con el trabajo y violación puede resultar en la terminación inmediata. Requiere un mes más experiencia verificable de trabajo cosecha a mano las fresas y arándano y moras negro.. Debe comprometerse a todo el período previsto de empleo.</p> <p>Fresas: Los trabajadores se curva y agacharse a recoger fresas según tamaño, color, forma y grado de madurez y coloque en contenedores de campo. Los trabajadores deben recoger fresas completamente maduras, deseche cualquier cara de gato, deformes, deterioradas o subdimensionadas bayas según las instrucciones del supervisor. Además, los trabajadores deben Retire con cuidado cualquier indeseables bayas planta que causara luego hongos que atacan la planta. Trabajadores pueden llevar el envase lleno pesa aproximadamente veinticinco 25 libras y viertan bin campo o carga en remolque. En algunos casos los trabajadores se esperar para llenar un cubo de plástico 4-quart/un galn, cuidadosamente llenar la cubeta de capacidad. (Balde deben estar completo para el peso y la medida correcta) Cuando está lleno, canastas ser llevado 2 o 3 por lado, por el cable mangos, enclavados para evitar magulladuras o derrames a fin de filas en el lugar sealado de camión de carga. A continuación, los cubos de bayas serán inspeccionados por calidad y cargados para su transporte al mercado en la carretera o refrigeradores. Los empleados turnar transportando las bayas para los refrigeradores, pero deben transportar toda la fruta por lo menos cada hora. Dependiendo de la demanda del mercado, los trabajadores también pueden requerirse a recoger fresas en tazas o pisos. Fresas cosechadas específicamente para la venta en un stand en la carretera como envases de productos frescos de mercado especialidad cesta deben ser calificado de campo. Para frutos cosechados para la venta en los stands en la carretera, cuidado debe utilizarse para asegurar que cada fresa está intacto y perfecto. Todas las bayas deben manejarse con cuidado para evitar heridas o cortes de uña. Recolectores tendrán mucho cuidado de no dañar las delicadas bayas.</p> |      |                                                                |                                    |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor

**H. Additional Material Terms and Conditions of the Job Offer**

*o. Job Offer Information 15*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |      |                                                                |                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|----------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Job duties in Spanish continued |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *<br>Calidad y mano de obra es de suma importancia.<br><br>Moras negro: Los trabajadores mano-cosechar moras. Este es un trabajo muy difícil, spero como son las moras espinosas. La cosecha es un trabajo difícil y doloroso que requiere alcanzar constantemente en las plantas espinosas moras. Destreza manual necesaria impide usar guantes. Y rasguos briar importantes complicaciones normales. Los trabajadores deben ser diligentes para evitar complicaciones naturales relacionadas con desastres naturales, incluyendo roble venenoso, niguas y serpientes. Los trabajadores se doble y agacharse a recoger moras segn tamao, color, forma y grado de madurez y coloque en un contenedor de campo. Los trabajadores deberrn recoger moras completamente maduras, deseche cualquier bayas deformes, deterioradas o subdimensionadas segn las instrucciones del supervisor. Adems, los trabajadores deben Retire con cuidado cualquier indeseables bayas planta que causara luego hongos que atacan la planta. Los trabajadores llevarn 2 contenedores llenos con 6,2 cestas de Qt en cada uno pesa aproximadamente 12 libras cada uno a la caravana de campo. Los trabajadores llenarn correctamente todas las cestas 2 qt. Los trabajadores turnarn transportando moras a la nevera, pero deben transportar toda la fruta a los refrigeradores de por lo menos cada hora. Luego los cubos de bayas sern examinados por la calidad y cargado para el transporte en carretera mercado dependiendo de la demanda del mercado, los trabajadores tambien se requiera a recoger moras en tazas o pisos. Moras cosechadas especificamente para la venta en un stand en la carretera como envases de productos frescos de mercado especialidad cesta deben ser calificado de campo. Para frutos cosechados para la venta en los stands en la carretera, cuidado debe utilizarse para asegurar que cada blackberry est intacto y perfecto. Todas las bayas deben manejarse con cuidado para evitar heridas o cortes de ua. Recolectores tendr mucho cuidado de no daar las delicadas bayas. Calidad y mano de obra es de suma importancia. Los trabajadores tambien ser necesarios que efectivamente el paquete moras en los refrigeradores a varios contenedores, clamshells, envases de litro y medio litro.<br><br>Todos los trabajadores se les requiere seguir las prcticas sanitarias comunes en todo momento. Esto es particularmente importante cuando se cosecha a mano cultivos para consumo humano. Los trabajadores se les requiere limpiarse las manos en la forma de lavarlas a fondo con agua y jabn antes de entrar en el campo para las actividades de cosecha y despues de cada descanso. Fumar y el uso de productos de tabaco es prohibido durante el tiempo de trabajo. |      |                                                                |                                              |

*p. Job Offer Information 16*

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |     |                                                                |                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------------------------------------------------|------------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | B.6 | 2. Name of Section or Category of Material Term or Condition * | Job Requirements - Job requirements in Spanish |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *<br>Se prolongada estar de pie, agacharse, doblarse y alcanzar. El trabajo continua al aire libre y en todo tipo de clima. Se prohbe el uso o posesin o estar bajo la influencia de alcohol o drogas ilegales durante el tiempo de trabajo. Los trabajadores pueden ser solicitados a someterse a pruebas de drogas al azar o alcohol, sin costo alguno para el trabajador. El incumplimiento de la solicitud o de dar prueba positiva puede resultar en la terminacin inmediata. Todas las pruebas ocurrirn despues de ser contratado y no es una parte del proceso de la entrevista. Se requieren resultados negativos antes de comenzar a trabajar. Debe ser capaz de levantar 75 libras a la altura del hombro repetidamente durante toda la jornada y fiable para levantar y transportar 75 libras en el campo. No debe obstaculizar la productividad de otro trabajador. El uso del telefono celular personal o otro electrnico durante las horas de trabajo es estrictamente prohibido excepto para llamadas o emergencias relacionadas con el trabajo y violacin puede resultar en la terminacin inmediata. Requiere un mes ms experiencia verificable de trabajo cosecha a mano las fresas y arndano. Debe comprometerse a todo el periodo previsto de empleo. |     |                                                                |                                                |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**



H-2A Agricultural Clearance Order  
Form ETA-790A Addendum C  
U.S. Department of Labor

**H. Additional Material Terms and Conditions of the Job Offer**

q. Job Offer Information 17

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |                                                                |                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------------------------------------------------|-----------------------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | B.6 | 2. Name of Section or Category of Material Term or Condition * | Job Requirements - Other terms and conditions |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>Material terms and conditions of the work contract may be translated into a language understood by the worker, however the English version of the work contract shall always control. Trminos y condiciones del contrato de trabajo pueden ser traducidos en una lengua comprensible para el trabajador, sin embargo la versin en lngls del contrato de trabajo siempre deber controlar.</p> <p>SUBSTANCE ABUSE POLICY: The use or possession or being under the influence of illegal drugs or alcohol during working time is prohibited. Workers may be requested to submit to random drug or alcohol tests at no cost to the worker. Failure to comply with the request or testing positive may result in immediate termination. All testing will occur post-hire and is not a part of the interview process. POLITICA DE ABUSO DE SUSTANCIAS: El uso o posesin o estar bajo la influencia de drogas ilegales o alcohol durante el tiempo de trabajo est prohibido. Los trabajadores pueden ser solicitados a someterse a pruebas de drogas y alcohol al azar sin costo alguno para el trabajador. El incumplimiento de la solicitud o de dar positivo puede resultar en la terminacin inmediata. Todas las pruebas se producir despues de la de coches y no es una parte del proceso de la entrevista.</p> <p>REQUIRED DEPARTURE: H-2A workers are required to leave the United States at the end of the period certified by the Department of Labor or separation from the employer, whichever is earlier, as required under 20 CFR 655.135(i), unless the H-2A worker is being sponsored by another subsequent employer. This shall serve as official notification of this requirement to any H-2A worker employed under the agricultural work agreement. SALIDA OBLIGATORIA: Los trabajadores H-2A necesitan salirse de los Estados Unidos a finales del perodo certificado por el Departamento de Trabajo o separacin por parte del el empleador, lo que ocurra primero, segn lo dispuesto en 20 CFR 655.135 (i), a menos que el H2A trabajador est siendo patrocinado por otro empleador posterior. Esto servir como notificacin oficial de este requisito a cualquier trabajador H-2A empleado bajo el acuerdo de trabajo agrcola.</p> |     |                                                                |                                               |

r. Job Offer Information 18

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |                                                                |                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|-----------------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Hourly work schedule |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>Taking into account lunch and break periods, the stated hourly work schedule is consistent with the anticipated total hours per week. By its very nature, seasonal agricultural work schedules vary according to numerous factors including but not limited to the elements, weather, crop conditions, job tasks needed to be done and time of the year. Teniendo en cuenta los perodos de almuerzo y descanso, el horario de trabajo por horas indicado es consistente con el total de horas previsto por semana. Por su propia naturaleza, los horarios de trabajo agrcola estacional varan segn numerosos factores que incluyen, entre otros, los elementos, el clima, las condiciones de los cultivos, las tareas laborales que deben realizarse y la poca del ao.</p> |      |                                                                |                                   |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**