

**UNITED STATES MEXICO CANADA AGREEMENT (USMCA)
CERTIFICATION OF ORIGIN**

BLANKET PERIOD (mm/dd/yyyy)	FROM: 01/01/2025 TO: 12/31/2025
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Please print or type

1. CERTIFIER NAME, ADDRESS, PHONE, AND EMAIL Avanti Nut Company, Inc. PO Box 719 Linden, CA 95236 USA	2. EXPORTER NAME, ADDRESS, PHONE, AND EMAIL Avanti Nut Company, Inc. PO Box 719 Linden, CA 95236 USA
TAX IDENTIFICATION NUMBER:	TAX IDENTIFICATION NUMBER:

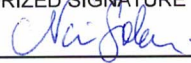
3. PRODUCER NAME, ADDRESS, PHONE, AND EMAIL Avanti Nut Company, Inc. PO Box 719 Linden, CA 95236 USA	4. IMPORTER NAME, ADDRESS, PHONE, AND EMAIL
TAX IDENTIFICATION NUMBER: 51-0595818	TAX IDENTIFICATION NUMBER:

5. DESCRIPTION OF GOOD(S)	6. HTS	7. ORIGIN CRITERION	8. CERTIFICATION INDICATOR	9. METHOD OF QUALIFICATION	10. COUNTRY OF ORIGIN
Shelled Walnuts	0802.32.0000	A	C	No	USA
Inshell Walnuts	0802.31.0000	A	C	No	USA
SEE ATTACHED CONTINUATION SHEET(S)					

Through completion of the Certification Indicator (Field 8), Certifier is declaring, in accordance with Article 5.2 (Claims for Preferential Tariff Treatment):
"A" Certifier has USMCA Certificate/Statement from Producer | "B" Certifier is Importer | "C" Certifier is Exporter | "D" Certifier is Producer

I CERTIFY THAT THE GOODS DESCRIBED IN THIS DOCUMENT QUALIFY AS ORIGINATING AND THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND ACCURATE. I ASSUME RESPONSIBILITY FOR PROVING SUCH REPRESENTATIONS AND AGREE TO MAINTAIN AND PRESENT UPON REQUEST OR TO MAKE AVAILABLE DURING A VERIFICATION VISIT, DOCUMENTATION NECESSARY TO SUPPORT THIS CERTIFICATION

THIS CERTIFICATE CONSISTS OF PAGES, INCLUDING ALL ATTACHMENTS.

11.	11a. AUTHORIZED SIGNATURE 	11b. COMPANY Avanti Nut Company, Inc.
	11c. NAME Nina Solari	11d. TITLE VP Quality Control & Food Safety
	11e. DATE (mm/dd/yyyy)	11f. TELEPHONE NUMBER 209-609-6689
		11g. EMAIL nina@avantinut.com