

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



**IMPORTANT:** In accordance with 20 CFR 653.500, all employers seeking U.S. workers to perform agricultural services or labor on a temporary, less than year-round basis through the Agricultural Recruitment System for U.S. Workers, must submit a completed job clearance order (Form ETA-790) to the State Workforce Agency (SWA) for placement on its intrastate and interstate job clearance systems. Employers submitting a job order in connection with an H-2A Application for Temporary Employment Certification (Form ETA-9142A) must complete the Form ETA-790 and attach a completed ETA-790A. All other employers submitting agricultural clearance orders must complete the Form ETA-790 and attach a completed ETA-790B. Employers and authorized preparers must read the general instructions carefully, complete ALL required fields/items containing an asterisk (\*), and any fields/items where a response is conditional as indicated by the section (§) symbol.

**I. Clearance Order Information**

| FOR STATE WORKFORCE AGENCY (SWA) USE ONLY    |                                  |                                      |  |
|----------------------------------------------|----------------------------------|--------------------------------------|--|
| Questions 1 through 17                       |                                  |                                      |  |
| 1. Clearance Order Number *                  | 2. Clearance Order Issue Date *  | 3. Clearance Order Expiration Date * |  |
| 3848195                                      |                                  | 1/17/2025                            |  |
| 4. SOC Occupation Code *                     | 5. SOC Occupation Title *        |                                      |  |
| 45-2091.00                                   | Agricultural Equipment Operators |                                      |  |
| SWA Order Holding Office Contact Information |                                  |                                      |  |
| 6. Contact's last (family) name *            | 7. First (given) name *          | 8. Middle name(s) §                  |  |
| MORETA                                       | RONDA                            |                                      |  |
| 9. Contact's job title *                     |                                  |                                      |  |
| AGRICULTURE AND FOREIGN LABOR SPECIALIST     |                                  |                                      |  |
| 10. Address 1 *                              |                                  |                                      |  |
| 4300 CROSSINGS BLVD                          |                                  |                                      |  |
| 11. Address 2 (suite/floor and number) §     |                                  |                                      |  |
|                                              |                                  |                                      |  |
| 12. City *                                   | 13. State *                      | 14. Postal code *                    |  |
| PRINCE GEORGE                                | Virginia                         | 23875                                |  |
| 15. Telephone number *                       | 16. Extension §                  | 17. Email address *                  |  |
| 434-774-6864                                 |                                  | foreignlaborcert@viriniaworks.gov    |  |

**II. Employer Contact Information**

|                                                              |                         |                              |  |
|--------------------------------------------------------------|-------------------------|------------------------------|--|
| 1. Legal Business Name *                                     |                         |                              |  |
| Mid Atlantic Gin, LLC                                        |                         |                              |  |
| 2. Trade Name/Doing Business As (DBA), if applicable §       |                         |                              |  |
|                                                              |                         |                              |  |
| 3. Contact's last (family) name *                            | 4. First (given) name * | 5. Middle name(s) §          |  |
| Hodges III                                                   | Mark                    | H                            |  |
| 6. Contact's job title *                                     |                         |                              |  |
| Owner                                                        |                         |                              |  |
| 7. Address 1 *                                               |                         |                              |  |
| 1378 Southampton Parkway                                     |                         |                              |  |
| 8. Address 2 (suite/floor and number) §                      |                         |                              |  |
|                                                              |                         |                              |  |
| 9. City *                                                    | 10. State *             | 11. Postal code *            |  |
| Emporia                                                      | Virginia                | 23847                        |  |
| 12. Telephone number *                                       | 13. Extension §         | 14. Business email address * |  |
| +1 (434) 336-0088                                            |                         | jackiebhodges@hotmail.com    |  |
| 15. Federal Employer Identification Number (FEIN from IRS) * |                         | 16. NAICS Code *             |  |
| [REDACTED]                                                   |                         | 115111                       |  |

**III. Type of Clearance Order**

|                                                                                                                                     |                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Indicate the type of agricultural clearance order being placed with the SWA for recruitment of U.S. workers. (choose only one) * | <input checked="" type="checkbox"/> 790A (placed in connection with an H-2A application)<br><input type="checkbox"/> 790B (not placed in connection with an H-2A application) |
|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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



H-2A Agricultural Clearance Order  
 Form ETA-790A  
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**A. Job Offer Information**

|                                                                                                                                                                                                          |                |                                                                            |   |                                  |   |                                                                           |                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------|---|----------------------------------|---|---------------------------------------------------------------------------|-----------------------------------------------------------------------|
| 1. Job Title * <b>Gin Operators</b>                                                                                                                                                                      |                |                                                                            |   |                                  |   |                                                                           |                                                                       |
| 2. Workers Needed *                                                                                                                                                                                      |                | a. Total                                                                   |   | b. H-2A Workers                  |   | Period of Intended Employment                                             |                                                                       |
|                                                                                                                                                                                                          |                | 4                                                                          | 4 | 3. First Date * <b>9/15/2024</b> |   | 4. Last Date * <b>5/22/2025</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) *                                                                                                               |                |                                                                            |   |                                  |   |                                                                           |                                                                       |
| 40                                                                                                                                                                                                       | a. Total Hours |                                                                            | 7 | c. Monday                        | 7 | e. Wednesday                                                              | 7                                                                     |
| 0                                                                                                                                                                                                        | b. Sunday      |                                                                            | 7 | d. Tuesday                       | 7 | f. Thursday                                                               | 5                                                                     |
|                                                                                                                                                                                                          |                |                                                                            |   |                                  |   | g. Friday                                                                 |                                                                       |
|                                                                                                                                                                                                          |                |                                                                            |   |                                  |   | h. Saturday                                                               |                                                                       |
| 7. Hourly Work Schedule *                                                                                                                                                                                |                |                                                                            |   |                                  |   |                                                                           |                                                                       |
|                                                                                                                                                                                                          |                |                                                                            |   |                                  |   | a. 7 : 00                                                                 | <input checked="" type="checkbox"/> AM<br><input type="checkbox"/> PM |
|                                                                                                                                                                                                          |                |                                                                            |   |                                  |   | b. 7 : 00                                                                 | <input type="checkbox"/> AM<br><input checked="" type="checkbox"/> PM |
| Temporary Agricultural Services and Wage Offer Information                                                                                                                                               |                |                                                                            |   |                                  |   |                                                                           |                                                                       |
| 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><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 \$ |                                                                       |
| \$ 15 .81                                                                                                                                                                                                |                | <input checked="" type="checkbox"/> HOUR<br><input type="checkbox"/> MONTH |   | \$ _____                         |   |                                                                           |                                                                       |
| 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><br><b>See Addendum C</b>               |                |                                                                            |   |                                  |   |                                                                           |                                                                       |

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**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. *                                                                                                                                                                                                                                                       | <b>3</b> | 3. Training: number of <u>months</u> required. *                                                                                                                                                                                                                                                                                                      | <b>0</b> |
| 4. Basic Job Requirements (check all that apply) §                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                       |          |
| <input type="checkbox"/> a. Certification/license requirements<br><input type="checkbox"/> b. Driver requirements<br><input type="checkbox"/> c. Criminal background check<br><input checked="" type="checkbox"/> d. Drug screen<br><input checked="" type="checkbox"/> e. Lifting requirement <u>50</u> lbs. |          | <input checked="" type="checkbox"/> f. Exposure to extreme temperatures<br><input checked="" type="checkbox"/> g. Extensive pushing or pulling<br><input checked="" type="checkbox"/> h. Extensive sitting or walking<br><input checked="" type="checkbox"/> i. Frequent stooping or bending over<br><input type="checkbox"/> j. Repetitive movements |          |
| 5a. Supervision: does this position supervise the work of other employees? *                                                                                                                                                                                                                                  |          | 5b. If "Yes" to question 5a, enter the number of employees worker will supervise. §                                                                                                                                                                                                                                                                   |          |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                           |          |                                                                                                                                                                                                                                                                                                                                                       |          |
| 6. Additional Information Regarding Job Qualifications/Requirements. *                                                                                                                                                                                                                                        |          |                                                                                                                                                                                                                                                                                                                                                       |          |
| <i>(Please begin response on this form and use Addendum C if additional space is needed. If no additional skills or requirements, enter "NONE" below)</i><br><b>See Addendum C</b>                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                       |          |

**C. Place of Employment Information**

|                                                                                                                                                                                                                                           |            |                  |             |                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------|-------------|----------------------------------------------------------------------|
| 1. Place of Employment Address/Location *                                                                                                                                                                                                 |            |                  |             |                                                                      |
| 1378 Southampton Parkway                                                                                                                                                                                                                  |            |                  |             |                                                                      |
| 2. City *                                                                                                                                                                                                                                 | 3. State * | 4. Postal Code * | 5. County * |                                                                      |
| Emporia                                                                                                                                                                                                                                   | Virginia   | 23847            | Southampton |                                                                      |
| 6. Additional Place of Employment Information. <i>(If no additional information, enter "NONE" below)</i> *                                                                                                                                |            |                  |             |                                                                      |
| NONE                                                                                                                                                                                                                                      |            |                  |             |                                                                      |
| 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 *                                                                                                                                                                                                                    |            |                  |                  |                                                                      |
| 1378 Southampton Parkway                                                                                                                                                                                                                         |            |                  |                  |                                                                      |
| 2. City *                                                                                                                                                                                                                                        | 3. State * | 4. Postal Code * | 5. County *      |                                                                      |
| Emporia                                                                                                                                                                                                                                          | Virginia   | 23847            | Southampton      |                                                                      |
| 6. Type of Housing <i>(check only one)</i> *                                                                                                                                                                                                     |            |                  | 7. Total Units * | 8. Total Occupancy *                                                 |
| <input checked="" type="checkbox"/> Employer-provided (including mobile or range) <input type="checkbox"/> Rental or public                                                                                                                      |            |                  | 1                | 20                                                                   |
| 9. Identify the entity that determined the housing met all applicable standards: *                                                                                                                                                               |            |                  |                  |                                                                      |
| <input checked="" type="checkbox"/> Local authority <input checked="" type="checkbox"/> SWA <input type="checkbox"/> Other State authority <input checked="" type="checkbox"/> Federal authority <input type="checkbox"/> Other (specify): _____ |            |                  |                  |                                                                      |
| 10. Additional Housing Information. <i>(If no additional information, enter "NONE" below)</i> *                                                                                                                                                  |            |                  |                  |                                                                      |
| Housing is a metal clad frame building with 15 bunk room, laundry room, kitchen & entertainment area                                                                                                                                             |            |                  |                  |                                                                      |
| 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A |

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**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.)  
 see addendum

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2. The employer: \*

|                                                                               |                |                                 |
|-------------------------------------------------------------------------------|----------------|---------------------------------|
| <input checked="" type="checkbox"/> <b>WILL NOT</b> charge workers for meals. |                |                                 |
| <input type="checkbox"/> <b>WILL</b> 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.)  
 see addendum

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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

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|                                                                                                                         |                 |                          |                       |
|-------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------|-----------------------|
| 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 | \$ <u>15</u> . <u>88</u> | per day *             |
|                                                                                                                         | b. no more than | \$ <u>59</u> . <u>00</u> | per day with receipts |

**G. Referral and Hiring Instructions**



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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 *<br>+1 (434) 336-0088                 | 3. Extension §<br>N/A | 4. Email Address to Apply *<br>jackiebhodes@hotmail.com |
| 5. Website Address (URL) to Apply *<br>www.vec.virginia.gov/emporia |                       |                                                         |

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

|                                                                                                                                                                                                                         |                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| 1. Is a completed <b>Addendum C</b> 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? * | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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).



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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).





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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



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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)(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>Hodges III | 2. First (given) name *<br>Mark | 3. Middle initial §<br>H |
| 4. Title *<br>Owner                   |                                 |                          |



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|                                                                                                                  |                               |
|------------------------------------------------------------------------------------------------------------------|-------------------------------|
| 5. Signature (or digital signature) *<br>Digital Signature Verified and Retained<br>By <i>Certifying Officer</i> | 6. Date signed *<br>7/15/2024 |
|------------------------------------------------------------------------------------------------------------------|-------------------------------|

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

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**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 |
|---------|-------------------------------|------------|------|--------------------------------------------------------------------|
|         | Cotton Ginning & maintenance  | \$ 15 . 81 | Hour |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |
|         |                               | \$ . .     |      |                                                                    |

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



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**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><br/>                     Operate ginning equipment, including but not limited to dryers, cleaners, gin stands, lint cleaners, bale presses including recording weight of bale &amp; seed, bale hoisters, skid steer loaders, forklifts, and cotton module feeders. Tag bales. Assist gin operator with repairing equipment, cleaning blockages, cleaning lint filters, refilling supplies, sweeping floors, removing trash buildup, and picking up cotton on module yard. Load cotton module to feeder. un-tarp modules, roll up and store module tarps, move bales from dock to warehouse. Operate mote press, secure wires to mote bales. Handle cotton samples at press. Operate cotton trash bale press, handle, and store cotton trash bales. Assist with general maintenance of all gin machinery and equipment as the ginning season ramp up begins and as the ginning process ends for the operation. General housekeeping and cleaning of gin and warehouse, and any other duties or responsibilities as directed by the Gin Superintendent or Head Ginner (shift leader), i.e. but not limited to repairing module truck chains or bearings, loading module tarps for delivery. Job involves stooping, lifting and working in inclement weather as well as indoor &amp; outdoor extreme temps. Must have legal authority to work in the US. Must be able to lift &amp; carry up to 50lbs. to shoulder height repetitively through the workday. Raises and/or bonuses may be offered to any seasonal worker employed pursuant to this job order, at the company's sole discretion, based on individual factors including work performance, skill, and tenure. Workers may be required to take random, post-accident, and/or upon suspicion drug test at no cost to worker, post hire. Testing positive or failure to comply may result in immediate termination from employment. Must have three months positive verifiable prior experience in job offered. No smoking or tobacco use of any kind will be permitted in the gin or warehouse. Employer reserves the right to discharge any employee found smoking or in possession of smoking materials including cigarettes, cigars, snuff, chewing tobacco, pipe tobacco, electronic cigarettes or any other smoking paraphernalia. Shift work may be available. The employer will designate time for lunch and breaks. Worker may be requested to work Sunday during peak times and special needs but not required. These requirements pertain to both H-2A and US workers. Extreme heat, cold or drought may affect working hours. Employer will offer 40 hours/week, weather and crop conditions permitting. Worker will report to work at designated time and place as directed by employer each day. General Conditions: All of the tasks in this job description constitute one (1) job; the employer may assign workers to different tasks on any day or to multiple tasks during the same day in the sole judgment of the employer. Workers may drive trucks to haul crops, supplies, tools, or farm workers. This is a very demanding and competitive business in which quality specifications must be rigorously adhered to. Sloppy work cannot and will not be tolerated. Workers should expect occasional periods of little or no work due to weather, crop, or other conditions beyond the control of the employer. This can occur anytime throughout the season. Given that the demands of agricultural production are unpredictable and determined by factors to include weather, crop conditions, market demands and seasonal task needs and numerous other factors, it is impossible to predict with any degree of accuracy the percentage of time that will be dedicated to any specific task.</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><br/>                     The employer will make the following deductions as applicable: FICA (X) Federal Taxes (X) State Taxes, court ordered child support, garnishments and liens according to individual circumstances, all as required by law, repayments of cash advances or loans, &amp; repayment of over payment of wages to the worker. Reasonable repair costs of damage to housing other than that caused by normal wear and tear, or any willful damage to or loss of equipment/tools will be deducted from workers found to have been responsible for such damage to housing or loss of equipment/tools. Other deductions may be made if expressly authorized by the worker in writing. While all workers are considered agricultural employees, overtime rates will be paid in accordance with Sec 13 of the FLSA. (During the ginning season, a partial overtime exemption includes up to 14 workweeks in any period of 52 consecutive weeks.)</p> |      |                                                                |                     |

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



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

*c. Job Offer Information 3*

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | B.6 | 2. Name of Section or Category of Material Term or Condition * | Additional Information Regarding Job Qualifications/Requirements |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>Must able to lift &amp; carry 50lbs to shoulder height repetitively through the workday. Workers may be required to take random, post accident, and/or upon suspicion drug test, post hire at no cost to worker. Testing positive or failure to comply may result in immediate termination from employment. Must have legal authority to work in the US. Must have three months positive verifiable prior experience in job offered. No smoking or tobacco use of any kind will be permitted in the gin or warehouse. Employer reserves the right to discharge any employee found smoking or in possession of smoking materials including cigarettes, cigars, snuff, chewing tobacco, pipe tobacco, electronic cigarettes or any other smoking paraphernalia. Generally, there are 2 shift periods: M-Sat 7:00 am to 7:00 pm &amp; M-Sat 7:00 pm to 7:00 am during the months of October - January annually. The employer will assign workers to a shift based on need. The availability will depend on the cotton harvest timing for the season</p> |     |                                                                |                                                                  |

*d. Job Offer Information 4*

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | G.1 | 2. Name of Section or Category of Material Term or Condition * | Referral and Hiring Instructions |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>Contact Employer at the number listed in part 1b. Monday - Friday 9:00 a.m. to 3:00 p.m. excluding all federal holidays.</p> <p>All local and intrastate (in state) applicants and interstate (out of state) applicants are to contact the local Virginia Employment Commission Workforce Center office in order to ascertain current employment, crop, or housing information and to enable proper arrangements to be made. It will be the responsibility of the Workforce Commission office to inform job seekers of the terms and conditions of this clearance order. Only workers meeting all qualifications on the job order should be referred. Interview will be performed by telephone or in person at the time of referral or as soon thereafter as possible. It is requested that the SWA give each referral a copy of the clearance order ETA 790 along with all attachments. If a holding office plans to refer several applicants at the same time, it is requested that the employer be advised in advance and a time scheduled for the interview. All applicants should be advised to remain in contact with the SWA.</p> <p>The actual employment offer is at the sole discretion of the employer. Applicants who arrive at the place of employment, referred to as walk-ins or gate hires, will be accepted until 50% of the contract period has elapsed from the application start date.</p> <p>Workers hired pursuant to the job offer from within normal commuting distance will not be provided housing, subsistence, or transportation.</p> <p>SWAs should fully apprise workers of the job specifications and terms and conditions of employment before a referral is made. Workers must meet all of the following criteria:</p> <p>(a.) Available and willingness to work for the entire season<br/>       (b.) Have transportation to job site at start of season daily for local workers and start of season for non-local workers.<br/>       (c.) Fully apprised and aware of the terms, conditions, and nature of employment.<br/>       (d.) Legally entitled to work in the US. Workers must provide documentation to enable employer to comply with the employment verification requirements and accurate completion of the I-9 Employment Verification form within three (3) days of employment according to US Law.<br/>       (e.) Able, willing, and qualified to perform the work.</p> <p>Order holding office:<br/>       VA Employment Commission Workforce Ctr<br/>       1300 Greensville Cty Cr, Suite C, Room 105, Emporia, VA 23847;<br/>       Telephone: (434) 634-2326</p> <p>Worker must have necessary documents to complete INS Form I-9 upon hiring but not prior to the interview. Workers will have up to three (3) days from date of hire to provide I-9 documents.</p> |     |                                                                |                                  |

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

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

e. Job Offer Information 5

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Descrip of specific services or labor to be performed |
| <p>3. Details of Material Term or Condition (up to 3,500 characters) *</p> <p>Worker must have three months (3) prior positive verifiable work experience in position offered. The employer retains the right to discharge an obviously unqualified worker, malingerer or recalcitrant worker who is physically able but does not demonstrate the willingness to perform the work necessary for the employer to grow a premium quality product, or for any other lawful reason. In addition, if the work performance is not acceptable to the employer, the worker?s employment will be terminated. All terms and conditions in this job order will apply equally to all workers, both US workers and H-2A workers, employed in the position described in this job order.</p> <p>IRS, Treasury 31.3121(g)-1 Agricultural Labor - Definition<br/>         (d) Services described in section 3121(g)(3). Services performed by an employee in the employ of any person in connection with any of the following operations constitute agricultural labor without regard to the place where such services are performed:<br/>         (1) The ginning of cotton</p> |      |                                                                |                                                                    |

f. Job Offer Information 6

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------|-------------------------|
| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                              | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Job Duties |
| <p>3. Details of Material Term or Condition (up to 3,500 characters) *</p> <p>If an updated AEWR for the occupational classification and geographic area is published in the Federal Register during the work contract, and the updated AEWR is lower than the rate guaranteed on the job order, the employer must continue to pay at least the rate guaranteed on the job order.</p> |      |                                                                |                         |

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





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

*g. Job Offer Information 7*

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | A.8a | 2. Name of Section or Category of Material Term or Condition * | Job Duties - Overtime Information |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>While all workers are considered agricultural employees, overtime rates will be paid in accordance with Sec 13 of the FLSA. (During the ginning season, a partial overtime exemption includes up to 14 workweeks in any period of 52 consecutive weeks.)</p> <p>While all workers are considered agricultural employees, overtime rates will be paid at time and a half for employment that exceeds 40 hours in a workweek. If the employee works over 40 hours in a workweek, the employer may elect to claim a partial exemption (for up to 14 weeks in aggregate in 52 consecutive weeks) during which overtime will be paid for hours worked in excess of 10 hours in any workday or in excess of 48 hours in any workweek whichever is best for the employee in accordance with Sec 13(i) of the FLSA.</p> <p>While all workers are considered agricultural employees, overtime rates will be paid at time and a half for employment that exceeds 40 hours in a workweek. If the employee works over 40 hours in a workweek, the employer may elect to claim a partial exemption (for up to 14 weeks in aggregate in a calendar year) during which overtime will be paid for hours worked in excess of 10 hours in any workday or in excess of 48 hours in any workweek whichever is best for the employee in accordance with Sec 13(h) of the FLSA.</p> |      |                                                                |                                   |

*h. Job Offer Information 8*

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | F.2 | 2. Name of Section or Category of Material Term or Condition * | Inbound/Outbound Transportation - Transportation In/Outbound |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>The employer will reimburse the worker for costs incurred by the worker for visa application fees, border crossing fees, transportation costs and reasonable subsistence from the place which the worker came to work for the employer to the place of employment to the extent that such worker-borne expenditures reduce the workers' FLSA earnings at the first pay period, or, no later than at the halfway point in the contract (50% period). Daily subsistence (not less than \$15.88 per day) or the current minimum subsistence amount as published in the Federal Register from the place from which the worker, without intervening employment will come to work for the employer, will be paid to workers who cannot provide receipts, and the maximum or the current maximum subsistence amount published in the Federal Register travel subsistence of \$59.00 per day will be paid to the workers with acceptable receipts. The transportation reimbursement will be calculated on the workers' actual cost but no more than the most economical and reasonable similar common carrier transportation charges for the distance involved.</p> <p>If the worker completes his contract, meaning his ?period of employment?, the employer will provide or pay the cost of return transportation and subsistence enroute from the place of employment except when the worker is not returning to the place of departure, and has subsequent employment with an employer who will bear transportation expenses. The transportation reimbursement will be calculated on the workers' actual cost but no more than the most economical and reasonable similar common carrier transportation charges for the distance involved.</p> <p>If the worker voluntarily abandons his employment or is terminated for cause prior to completion of his contract, the employer will not be responsible for providing or paying the cost of return transportation and subsistence enroute from the place of employment to the place of departure.</p> <p>All transportation provided by the employer will be by common carrier or other transportation facilities that conform to applicable regulations of the Interstate Commerce Commission.</p> |     |                                                                |                                                              |

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

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

*i. Job Offer Information 9*

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>F.1</b> | 2. Name of Section or Category of Material Term or Condition * | Daily Transportation - Daily Transportation |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *<br>The employer will provide transportation at no cost to the worker from the employer provided housing and/or, as applicable, centralized pick-up points to the work site and return to such housing and/or centralized pick-up points, as applicable, on a daily basis.<br><br>2 SUVs (5 person capacity each) and 1 mini van (6 person capacity) will be utilized to transport workers on a daily basis.?Workers will be provided employer owned transportation from housing or other centralized pre-determined location at the beginning of each workday and back at the end of each workday according to the daily work schedule in the contract, as a general rule.? The daily transportation schedule/mode of transportation is subject to change based on daily activities as agricultural operations can be unpredictable. |            |                                                                |                                             |

*j. Job Offer Information 10*

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>B.6</b> | 2. Name of Section or Category of Material Term or Condition * | Job Requirements - Miscellaneous |
| 3. Details of Material Term or Condition ( <i>up to 3,500 characters</i> ) *<br>Addendum C: Section I, Item 1: Job Opportunity<br>In the event of any conflict between the English and Spanish versions of this document, the English shall govern. Addendum C: Section I, Item 8: Three-fourths Guarantee:<br>All requests for leave of absence must be in writing. All absences will be counted towards hours offered for the purpose of computing the 3/4 guarantee. Addendum C: Section I, Item 17 A: Additional Assurances for Clearance Orders:<br>The applicant holding office must notify all referred farmworkers, farm labor contractors on behalf of farmworkers, or family heads on behalf of farmworker family members, to contact an ES office, preferably the order-holding office, to verify the date of need cited in the clearance order between 9 and 5 business days prior to the original date of need cited in the clearance order; and that failure to do so will disqualify the referred farmworker from the first weeks' pay as described in paragraph (c)(3)(i) of this section. The SWA must make a record of this notification. |            |                                                                |                                  |

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

k. Job Offer Information 11

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>E.1</b> | 2. Name of Section or Category of Material Term or Condition * | <b>Meal Provision - Provision of Meals</b> |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p>Employer will furnish free &amp; convenient cooking &amp; kitchen facilities so that worker may prepare own meals. Employer will provide cooking, food preparation, &amp; serving utensils along with housing and utilities to workers for whom housing must be provided (workers who are unable to return to their place of residence the same day) at no cost to the workers. Employer will provide transportation no less than once a week to the nearest neighboring town to assure worker access to stores where one can purchase groceries if the employer is providing cooking &amp; kitchen facilities. Dining, full kitchen/cooking facilities and other common areas will be shared by all workers.</p> |            |                                                                |                                            |

l. Job Offer Information 12

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| 1. Section/Item Number *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>B.6</b> | 2. Name of Section or Category of Material Term or Condition * | <b>Job Requirements - Work Rules Page 1 of 2</b> |
| <p>3. Details of Material Term or Condition (<i>up to 3,500 characters</i>) *</p> <p><b>Work Rules</b><br/>                 Although not intended to be a complete list, these work rules are intended to provide guidance to workers of standards of conduct expected of them. Notice is provided that violation of lawful job-related employer requirements, including these work rules, will be considered grounds for immediate termination of a worker's employment. Penalties such as suspension from work opportunity for the remainder of a day to three days may be made in the case of less serious violations.<br/>                 Workers are expected to comply with all rules relating to discipline, attendance, work quality and effort, and the care and maintenance of all property provided to them by the employer.<br/>                 1. Workers who perform sloppy work may be suspended without pay for the remainder of a workday or for up to three days in the sole judgment of their supervisor, depending on the degree of the infraction, the worker's prior record and other relevant factors. Discharge of the worker may result from any subsequent offense.<br/>                 2. No use or possession of beer, liquor, marijuana or illegal drugs is permitted during work time or during any workday before work is completed for the day (such as during meals); workers may not report for work under the influence of beer, liquor, or illegal drugs. Employees may be terminated for excessive use of alcohol, drunk and/or disorderly conduct on employer premises, including housing. Illegal drugs may not be used, sold, manufactured or kept on any employer premises, including housing. Workers may be required to take random, post-accident, and/or upon suspicion drug test at no cost to worker, post hire.<br/>                 3. Excessive absences will not be permitted. This is regular, everyday work for which employees are expected to be present, able and willing to perform every scheduled workday. This is not sporadic or ?day work.? Excessive or repeated tardiness is not acceptable. Any absence from work must be reported by 7AM. Five consecutive workdays of unexcused absence will constitute abandonment of employment and worker will be terminated.<br/>                 4. Workers shall maintain any living quarters provided to them clean and in good repair, given reasonable wear and tear. Workers shall cooperate in maintaining common kitchen and living areas. No pets of any kind are permitted.<br/>                 5. All posters required by federal and state law will be posted at each camp. They are not to be removed, defaced, or altered in any way. Workers who wish copies may ask their supervisor.<br/>                 6. All housing must be locked each morning before leaving for work. Lights and unnecessary heat should be turned off; doors and windows closed in event and rain and when heat is turned on.<br/>                 7. Workers living in employer's housing assigned to bunk beds many not separate bunk beds, as floor space in sleeping rooms is needed by all occupants.<br/>                 8. Workers living in employer's housing many not cook in sleeping rooms or any other non-kitchen areas. Employer furnishes cooking facilities and equipment.<br/>                 9. Workers may not drop paper, cans, bottles and other trash in fields, work areas, or on housing premises. Trash and waste receptacles must be used.<br/>                 10. Workers may not take unauthorized breaks from work. This includes personal cell phone calls during work hours.<br/>                 11. Workers may not leave the field or other assigned work area without permission of employer or person in charge.<br/>                 12. With the exception of the workers' assigned housing, workers may not enter employer's premises without authorization.</p> |            |                                                                |                                                  |

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

*m. Job Offer Information 13*

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| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b></p> <p>13. Workers may not begin work prior to scheduled starting time or continue working after stopping time.</p> <p>14. Workers living in employer's housing may not entertain guests in housing premises after 10:30 p.m. except on Saturday night on which night guest hours end at 12:00 midnight. No persons, other than workers assigned by employer to a room, may sleep in any room. Workers and/or their guests may not engage in indecent, immoral, or illegal conduct at any time on the employer's premises or in an employer-owned vehicle. Workers may be terminated upon discovery of 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.</p> <p>15. Workers may not deliberately restrict production, damage plants or bruise fruit.</p> <p>16. Any worker who physically threatens another worker, the employer or any supervisor will be subject to immediate discharge.</p> <p>17. Any worker who is found carrying, using or possessing any dangerous or deadly weapon will be subject to immediate discharge.</p> <p>18. Workers will be discharged for fighting on the employer's premises, including housing premises, at any time.</p> <p>19. Workers may not engage in horseplay, scuffling, throwing things, wasting time or loitering during work hours.</p> <p>20. Workers will be discharged if they steal from fellow workers or the employer.</p> <p>21. Workers will not falsify identification, personnel, medical, production or other work-related records.</p> <p>22. Workers may not willfully abuse or destroy any machinery, truck or other vehicle, equipment, tools, or other property belonging to the employer or to other employees.</p> <p>23. Workers may not use or operate trucks or other vehicles, machines, tools, or other equipment and property to which the worker has not been specifically assigned by his supervisor. Workers may not use or operate trucks or other vehicles, tools or other equipment or property for their personal use unless expressly authorized by the employer.</p> <p>24. Workers must not misuse or remove from the farm premises without authorization any employer-owned property.</p> <p>25. Workers must obey all safety rules and common safety practices and must report any injuries or accidents promptly to their supervisor or employer's office.</p> <p>26. Workers must follow supervisor's instructions. Insubordination is cause for dismissal.</p> <p>27. Workers may not make alterations to housing that violate ETA and/or OSHA housing guidelines, as applicable.</p> <p>28. Except as otherwise noted above, employees who violate work rules will be disciplined according to the following schedule:<br/>       First offense: oral warning and correction<br/>       Second offense: written warning and unpaid leave for balance of pay<br/>       Third offense: immediate discharge with written fact statement. Employee will be asked to sign written fact statement.</p> |            |                                                                |                                                  |

*n. Job Offer Information 14*

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| <p><b>3. Details of Material Term or Condition (up to 3,500 characters) *</b></p> <p>Housing &amp; utilities are provided at no cost to workers who are unable to return to their place of residence the same day. Housing will be provided to workers only. No person who is not an employee and has not been assigned housing will be permitted to occupy the housing. Workers will be assigned to employer provided housing by the owner or manager and must occupy the quarters assigned to them. Employer retains possession and control of the housing premises at all times, and worker, if provided housing under the terms of this work agreement, shall vacate the housing promptly upon termination of employment with the employer who provides the housing, in accordance with state law. Reasonable repair cost of damage, other than that cause by normal wear and tear, will be charged to the workers found to be responsible for damage to housing or furnishings. Housing will be clean and in compliance with ETA 20 CFR 654 Housing Standards. Has complete furnishings with appliances. Worker will be responsible for maintaining housing in a neat &amp; clean manner and in compliance with Work Rules which will be provided upon hiring and are attached hereto and incorporated by reference in this application.</p> <p>All housing is group housing in which all workers will share kitchens and common areas without regard to gender. Female workers, however, will be provided with sleeping facilities shared only with other family members or with other females. Sex-segregated toilet facilities will be provided.</p> <p>If one has not already been performed at the time of this filing, Mid Atlantic Gin requests a timely inspection (prior to occupancy) of employer-provided worker housing by the Virginia Employment Commission at any reasonable time to verify its condition so as to ensure that all worker housing meets standards no later than 30 days prior to occupancy.</p> <p>Housing is expected to be occupied by September 15, 2024.</p> |             |                                                                |                                                    |

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