



U.S. Department of Labor  
Employment and Training Administration

OMB Control No. 1205-0134  
Expiration Date: October 31, 2015

Agricultural and Food Processing Clearance Order ETA Form 790  
Orden de Empleo para Obreros/Trabajadores Agrícolas y Procesamiento de Alimentos

(Print or type in each field block - To include additional information, go to block # 28 - Please follow Step-By-Step Instructions)  
(Favor de usar letra de molde en la solicitud - Para incluir información adicional vea el punto # 28 - Favor de seguir las instrucciones paso-a-paso)

<p>1. Employer's and/or Agent's Name and Address (Number, Street, City, State and Zip Code / Nombre y Dirección del Empleador/Patrón y/o Agente (Número, Calle, Ciudad, Estado y Código Postal): Thanksgiving Farm at The Center for Discovery c/o Greg York 641 Old Rt. 17 Monticello, NY 12701</p> <p>Mailing Address: P.O. Box 840 Harris, NY 12742</p> <p>a) Federal Employer Identification Number (FEIN) / Número federal de identificación del Empleador: FEIN: 14-1395426</p> <p>b) Telephone Number / Número de Teléfono: (845) 707-8384</p> <p>c) Fax Number / Número de Fax: NONE</p>	<p>Nos. 4 through 8 for STATE USE ONLY Números 4 a 8 para USO ESTATAL</p>
<p>2. Address and Directions to Work Site / Domicilio y Direcciones al lugar de trabajo: Address#1: 641 Old Rt. 17, Monticello, NY 12701</p> <p>From the New York State Thruway (Rt. 87) travel west on Rt. 17. Take exit 103, also marked Rapp Rd. At the stop sign go left onto old Rt. 17. Travel 1/2 mile on Old Rt. 17 and take a right on (See Attachment # 2)</p> <p>Address #2 - 103 Miteer Rd., Hurleyville, NY 12747 (See Attachment #2) Both work locations are owned and operated by Thanksgiving Farm at the Center for Discovery.</p>	<p>4. SOC (O*NET/OES) Occupational Code / Código Industrial: 45209100 a. SOC (ONET/OES) Occupational Title / Título Ocupacional Agricultural Equipment operators</p> <p>5. Job Order No. / Num. de Orden de Empleo: NY1113649</p>
<p>3. Address and Directions to Housing / Domicilio y Direcciones al lugar de vivienda: Address: 317 Main Street, Hurleyville, NY 12747 and 319 Main Street, Hurleyville, NY 12747</p> <p>From Rt 87, the New York Thruway take Rt. 17 west to Exit 105b (Kiamisah). Merge onto Rt 42 North and turn left at the first stoplight onto Rt. 103. Continue on Rt. 103 for five miles until arriving in Hurleyville. Pass through the center of town and the housing is on the left on Main Street. Blue house. If you get the blinking yellow light you have gone too far. Housing capacity is 5. for each housing</p> <p>a) Description of Housing / Descripción de la vivienda: unit, total capacity of Fully furnished blue house with a capacity of 5. 10.</p> <p>Both work locations are owned and operated by Thanksgiving Farm at the Center for Discovery.</p>	<p>6. Address of Order Holding Office (include Telephone number) / Dirección de la Oficina donde se radico la oferta (incluya el número de teléfono): 877-466-9757</p> <p>a. Name of Local Office Representative (include direct dial telephone number) / Nombre del Representante de la Oficina Local (Incluya el número de teléfono de su línea directa). 877-466-9757</p>
	<p>7. Clearance Order Issue Date / Fecha de Emisión de la Orden de Empleo: 12/19/2014</p> <p>8. Job Order Expiration Date / Fecha de Vencimiento o Expiración de la Orden de Empleo 7/16/2015</p>
	<p>9. Anticipated Period of Employment / Periodo anticipado o previsto de Empleo: From / Desde: 02/15/2015 To / Hasta: 12/15/2015</p>
	<p>10. Number of Workers Requested / Número de Trabajadores Solicitados: 7</p>
	<p>11. Anticipated Hours of Work per Week / Horas Anticipadas/Previstas de Trabajo por Semana. Total: 40</p> <p>Sunday / Domingo 0 Thursday / Jueves 8 Monday / Lunes 8 Friday / Viernes 8 Tuesday / Martes 8 Saturday / Sábado 0 Wednesday / Miércoles 8</p>
	<p>12. Anticipated range of hours for different seasonal activities: / Rango previsto de horas par alas diferentes actividades de la temporada: 7:00 am to 4:00 PM 8 hours per day, Saturday and Sunday no work expected.</p>
	<p>13. Collect Calls Accepted from: / Aceptan Llamadas por Cobrar de:</p> <p>Employer / Empleador: Yes / Si <input checked="" type="checkbox"/> No <input type="checkbox"/></p>

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14. Describe how the employer intends to provide either 3 meals a day to each worker or furnish free and convenient cooking and kitchen facilities for workers to prepare meals / Describa cómo el empleador tiene la intención de ofrecer, ya sea 3 comidas al día a cada trabajador, o proporcionar gratuitamente instalaciones para cocinar. Employer will furnish free and convenient cooking and kitchen facilities so workers may prepare their own meals.  
 Employer will provide 3 meals per day and will charge the worker \$\_\_\_\_\_ per day.  
 Employer will furnish free and convenient cooking and kitchen facilities so workers may prepare their own meals.  
 Employer will provide (on a <sup>regularly</sup> ~~voluntary~~ basis) transportation to assure workers access to Stores where they can purchase groceries, if the employer is providing cooking and kitchen facilities.

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15. Referral Instructions and Hiring Information / Instrucciones sobre cómo Referir Candidatos/Solicitantes - (Explain how applicants are to be hired or referred, and the Employer's/Agent's available hour to interview workers / Explique cómo los candidatos serán contratados o referidos, y las horas disponibles del empleador/agente para entrevistar a los trabajadores). See instructions for more details / Vea las instrucciones para más detalles.

Interested workers may contact Greg York at (845)707-8384 for a phone interview or by mail at:

Thanksgiving Farm at The Center for Discovery  
c/o Greg York  
P.O. Box 840 Harris, NY 12742

16. Job description and requirements / Descripción y requisitos del trabajo:  
Drive and operates farm machines to grow and harvest vegetables including artichokes, broccoli, beets, carrots, cabbage, celeriac, celery, eggplant, and garlic. Attaches farm implements to tractor, and drives tractor while operating implements on the field. To till soil, plant, cultivate and fertilize a large variety of crops. Thins & weeds plants using hoes and shovels or power drawn implements. Each worker must have 6 months verifiable work experience driving 110 hp(and/or larger) tractors. The workers will be driving tractors, assembling and moving irrigation equipment, applying spray materials to a large variety of crops for insect, disease, weed control, and as fertilizers. During the fall they will be working in greenhouses also planting, harvesting, and cleaning. Must be able to bend, stoop, and stand on feet for long periods of time. Because the farm is part of a treatment center and school for individuals with disabilities, and farm work is included as part of the program for residents, farm workers must also be able and willing to interact effectively and safely with disabled individuals who are part of the therapeutic program. Workers will be required to work in a multidisciplinary, therapeutic environment. A drug screen and background check will be required ~~pre~~ employment and will be at the employer's expense.

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Conduce y opera máquinas agrícolas para crecer y verduras de cosecha, incluyendo las alcachofas, brócoli, remolacha, zanahoria, repollo, apio, el apio, la berenjena y el ajo. Concede granja implementos para tractor, tractor y aperos de unidades mientras que operan en el campo. Para labrar tierra, sembrar, cultivar y fertilizar una gran variedad de cultivos. Thins malas hierbas y plantas que utilizan azadas y palas eléctricas o implementos de tracción. Cada trabajador debe tener experiencia de 6 meses de trabajo verificable conducción 110 caballos de fuerza (y / o más grande) tractores. Los trabajadores estarán conduciendo tractores, montaje y equipos de movimiento de riego, la aplicación de materiales de pulverización a una gran variedad de cultivos para los insectos, las enfermedades, control de malezas, y como fertilizantes. Durante el otoño se va a trabajar en los invernaderos también la plantación, cosecha y limpieza. Debe ser capaz de doblarse, agacharse, y monte en pie durante largos períodos de tiempo. Debido a que la granja es parte de un centro de tratamiento y la escuela para las personas con discapacidad y el trabajo agrícola se incluye como parte del programa para los residentes, los trabajadores agrícolas también deben ser capaces y estar dispuestos a interactuar de forma efectiva y segura con las personas con discapacidad que forman parte de la programa terapéutico. Se requerirá a los trabajadores a trabajar en un entorno multidisciplinar, terapéutico. Un exámen de drogas y chequeo de antecedentes criminales será necesario ~~al~~ empleo ~~de pre~~ y estará a cargo de los empleadores.

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después del

1. Is previous work experience preferred? / Se prefiere previa experiencia? Yes / Si  No  If yes, number of months preferred: / Si es así, numero de meses de experiencia:   6  

2. Check all requirements that apply:

- |  |   |
|--|---|
| <input type="checkbox"/> Certification/License Requirements / Certificación/Licencia Requisitos  | <input checked="" type="checkbox"/> Criminal Background Check / Verificación de antecedentes penales              |
| <input type="checkbox"/> Driver Requirements / Requisitos del conductor                          | <input checked="" type="checkbox"/> Drug Screen / Detección de Drogas – Post Employment                           |
| <input type="checkbox"/> Employer Will Train / Empleador entrenará o adiestrará                  | <input type="checkbox"/> Extensive Pushing and Pulling / Empujar y Jalar Extensamente                             |
| <input checked="" type="checkbox"/> Extensive Sitting / Estar sentado largos ratos               | <input checked="" type="checkbox"/> Extensive Walking / Caminar por largos ratos                                  |
| <input checked="" type="checkbox"/> Exposure to Extreme Temp. / Expuesto a Temperaturas Extremas | <input checked="" type="checkbox"/> Frequent Stooping / Inclinandose o agachándose con frecuencia                 |
| <input type="checkbox"/> Lifting requirement / Levantar o Cargar <u>      </u> lbs./libras       | <input type="checkbox"/> OT/Holiday is not mandatory / Horas Extras (sobre tiempo) / Días Feriados no obligatorio |
| <input checked="" type="checkbox"/> Repetitive Movements / Movimientos repetitivos               |   |

17. Wage Rates, Special Pay Information and Deductions / Tarifa de Pago, Información Sobre Pagos Especiales y Deducciones (Rebajas)

Crop Activities	Hourly Wage	Piece Rate / Unit(s)	Special Pay (bonus, etc.)	Deductions*	Yes/Si	No	Pay Period / Período de Pago	
				Deducciones				
Cultivos	Salario por Hora	Pago por Pieza / Unidad(es)	Pagos Especiales (Bono, etc.)				/ /	
Artichokes	\$14.06 11.26	\$		Social Security / Seguro Social	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Weekly / Semanal	
Broccoli	\$14.06 11.26	\$		Federal Tax / Impuestos Federales	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Beets	\$14.06 11.26	\$		State Tax / Impuestos Estatales	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bi-weekly / Quincenal	
Carrots	\$14.06 11.26	\$		Meals / Comidas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Cabbage	\$14.06 11.26	\$		Other (specify) / Otro (especifica)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Monthly/Mensual	
Agricultural Equipment Operator							<input type="checkbox"/>	
all \$ 11.26								Other/Otro <input type="checkbox"/>

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18. More Details About the Pay / Mas Detalles Sobre el Pago:

19. Transportation Arrangements / Arreglos de Transportación

The employer will provide advance transportation for reasonable (most economical) common carrier or other transportation (if it is the prevailing practice). If not the prevailing practice, the employer will reimburse the worker for transportation costs and subsistence to the employer's work site when the worker completes 50% of the work period.

20. Is it the prevailing practice to use Farm Labor Contractors (FLC) to recruit, supervise, transport, house, and/or pay workers for this (these) crop activity (ies)? / ¿Es la práctica habitual usar Contratistas de Trabajo Agrícola para reclutar, supervisar, transportar, dar vivienda, y/o pagarle a los trabajadores para este(os) tipo(s) de cosecha(s)? Yes / Si  No

If you have checked yes, what is the FLC wage for each activity? / Si contesto "Si," cuál es el salario que le paga al Contratista de Trabajo Agrícola por cada actividad?

N/A

21. Are workers covered for Unemployment Insurance? / ¿Se le proporcionan Seguro de Desempleo a los trabajadores? Yes/Si  No

22. Are workers covered by workers' compensation? / ¿Se le provee seguro de compensación/indemnización al trabajador: Yes/Si  No

23. Are tools, supplies, and equipment provided at no charge to the workers? / ¿Se les proveen herramientas y equipos sin costo alguno a los trabajadores? Yes/Si  No

24. List any arrangements which have been made with establishment owners or agents for the payment of a commission or other benefits for sales made to workers. (If there are no such arrangements, enter "None".) / Enumere todos los acuerdos o convenios hechos con los propietarios del establecimiento o sus agentes para el pago de una comisión u otros beneficios por ventas hechas a los trabajadores. (Si no hay ningún acuerdo o convenio, indique "Ninguno".)

N/A

25. List any strike, work stoppage, slowdown, or interruption of operation by the employees at the place where the workers will be employed. (If there are no such incidents, enter "None".) / Enumere toda huelga, paro o interrupción de operaciones de trabajo por parte de los empleados en el lugar de empleo. (Si no hay incidentes de este tipo, indique "Ninguno".)

N/A

26. Is this job order to be placed in connection with a future Application for Temporary Employment Certification for H-2A workers? / ¿Esta orden de empleo ha sido puesta en conexión con una futura solicitud de certificación de empleo temporal para trabajadores H-2A?

Yes/S  No

27. Employer's Certification: This job 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. / Certificación del Empleador: Esta orden de trabajo describe los términos y condiciones del empleo que se le ofrece, y contiene todos los términos y condiciones materiales ofrecidos.

Gregory M York, Verjodalde Farmer  
Employer's Printed Name & Title / Nombre y Título en Letra de Moldel/Imprenta del Empleador

Gregory M York  
Employer's Signature / Firma y Título del Empleador

12/13/14  
Date / Fecha

**READ CAREFULLY**, in view of the statutorily established basic function of the Employment Service as a no-fee labor exchange, that is, as a forum for bringing together employers and job seekers, neither the Employment and Training Administration (ETA) nor the State agencies are guarantors of the accuracy or truthfulness of information contained on job orders submitted by employers. Nor does any job order accepted or recruited upon by the American Job Center constitute a contractual job offer to which the American Job Center, ETA or a State agency is in any way a party.

**LEA CON CUIDADO**, En vista de la función básica del Servicio de Empleo establecida por ley, como una entidad de intercambio laboral sin comisiones, es decir, como un foro para reunir a los empleadores y los solicitantes de empleo, ni ETA ni las agencias del estado pueden garantizar la exactitud o veracidad de la información contenida en las órdenes de trabajo sometidas por los empleadores. Ni ninguna orden de trabajo aceptado o contratado en el Centro de Carreras (American Job Center) constituyen una oferta de trabajo contractual a las que el American Job Center, ETA o un organismo estatal es de ninguna manera una de las partes.

#### PUBLIC BURDEN STATEMENT

The public reporting burden for responding to ETA Form 790, which is required to obtain or retain benefits (44 USC 3501), is estimated to be approximately 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and reviewing the collection. The public need not respond to this collection of information unless it displays a currently valid OMB Control Number. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden, to the U.S. Department of Labor, Employment and Training Administration, Office of Workforce Investment, Room C-4510, 200 Constitution Avenue, NW, Washington, DC 20210.

#### DECLARACION DE CARGA PÚBLICA

La carga de información pública para responder a la Forma ETA 790, que se requiere para obtener o retener beneficios (44 USC 3501), se estima en aproximadamente 60 minutos por respuesta, incluyendo el tiempo para revisar las instrucciones, buscar fuentes de datos existentes, recopilar y revisar la colección. El público no tiene por qué responder a esta recopilación de información a menos que muestre un número de control OMB válido. Esta información es pública y no hay ninguna expectativa de confidencialidad. Envíe sus comentarios acerca de esta carga o cualquier otro aspecto de esta colección, incluyendo sugerencias para reducir esta carga, al U.S. Department of Labor, Employment and Training Administration, Office of Workforce Investment, Room C-4510, 200 Constitution Avenue, NW, Washington, DC 20210.

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28. Use this section to provide additional supporting information (including section Box number). Include attachments, if necessary. / Utilice esta sección para proporcionar información adicional de apoyo; incluya el número de la sección e incluya archivos adjuntos, si es necesario.

I/A

20 CFR 653.501  
Assurances

**INTRASTATE AND INTERSTATE CLEARANCE ORDER**

The employer agrees to provide to workers referred through the clearance system the number of hours of work per week cited in Item 10 of the clearance order for the week beginning with the anticipated date of need, unless the employer has amended the date of need at least 10 working days prior to the original date of need by so notifying the Order-Holding Office (OHO). If the employer fails to notify the OHO at least 10 working days prior to the original date of need, the employer shall pay eligible workers referred through the intrastate/interstate clearance system the specified hourly rate or pay, or in the absence of a specified hourly rate or pay, the higher of the Federal or State minimum wage rate for the first week starting with the original anticipated date of need. The employer may require workers to perform alternative work if the guarantee is invoked and if such alternative work is stated on the job order.

The employer agrees that no extension of employment beyond the period of employment shown on the job order will relieve the employer from paying the wages already earned, or specified in the job order as a term of employment, providing transportation or paying transportation expenses to the worker's home.

The 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.

The employer agrees to expeditiously notify the OHO or State agency by telephone 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.

The employer, if acting as a farm labor contractor, has a valid farm labor contractor registration certificate.

The employer assures the availability of no cost or public housing which meets applicable Federal and State standards and which is sufficient to house the specified number of workers requested through the clearance system.

The employer also assures that outreach workers shall have reasonable access to the workers in the conduct of outreach activities pursuant to 20 CFR 653.107.

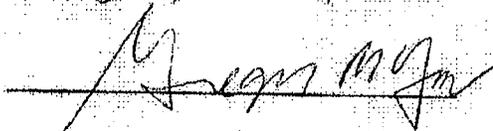
Employer's Name

Gregory M York

Date:

12/13/14

Employer's Signature



Besides the material terms and conditions of the employment, the employer must agree to these assurances if the job order is to be placed as part of the Agricultural Recruitment System. This assurance statement must be signed by the employer, and it must accompany the ETA Form 790.

ETA 790 Attachments  
for  
Thanksgiving Farm at the Center for Discovery  
641 Old Rt. 17  
Harris, NY 12742  
(845) 707-8384

**ITEM # 2, LOCATION AND DIRECTIONS TO WORK SITE:**

The directions to the work site are: (There are 2 farm locations. Workers will always be transported between both farm sites by farm staff in farm vehicles at no cost to the workers.)

641 Old Rt. 17, Monticello, NY 12701

From the New York State Thruway (Rt. 87) travel west on Rt. 17. Take exit 103, also marked Rapp Rd. At the stop sign go left onto old Rt. 17. Travel 1/2 mile on Old Rt. 17 and take a right onto Holmes Rd. Travel 1 mile on Holmes Rd. and you will see farm.

103 Miteer Rd., Hurleyville, NY 12747

From Rt 87, the New York Thruway take Rt. 17 west to Exit 105b (Kiamisha). Merge onto Rt 42 North and turn left at the first stoplight onto Rt. 103. Continue on Rt. 103 for five miles until arriving in Hurleyville. Pass through the center of town and turn left at the blinking yellow light onto Miteer Rd. Continue 0.25 miles and turn left into Stonewall Preserve.

Thanksgiving Farm at the Center for Discovery Owns and Operates all worksites and housing.

**ITEM # 3, LOCATION AND DESCRIPTION OF HOUSING:**

Address of housing: 317 Main Street, Hurleyville, NY 12747  
*and 319 Main Street*

Directions to housing are: From Rt 87, the New York Thruway take Rt. 17 west to Exit 105b (Kiamisah). Merge onto Rt 42 North and turn left at the first stoplight onto Rt. 103. Continue on Rt. 103 for five miles until arriving in Hurleyville. Pass through the center of town and the housing is on the left on Main Street. Housing is a blue house. If you get the blinking yellow light you have gone too far. Housing capacity is 5. *- in each location total capacity of 10.*

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Housing will be clean and meet applicable Federal Housing Standards. Workers will be responsible for maintaining housing in a neat, clean manner. Housing and utilities are provided at no cost to workers who are unable to return to their place of residence the same day. In the event a female worker is hired, separate toilet, shower, and sleeping rooms will be provided by the employer.

Employer requests conditional access into the Interstate and Intrastate Clearance System and assures that the worker housing will meet the applicable Federal Standards not later than 30 days in advance of the date of need reflected on the attached ETA 790.

Workers may be reached at the following address and phone number:

ADDRESS: 317 Main Street, Hurleyville, NY 12747  
PHONE: (845) 707-8384

**ITEM # 13, BOARD ARRANGEMENTS: (check appropriate boxes)**

- Employer will provide 3 meals per day and will charge the worker \$\_\_\_\_\_ per day.
- Employer will furnish free and convenient cooking and kitchen facilities so workers may prepare their own meals. *regularly*
- Employer will provide *(on a voluntary basis)* transportation to assure workers access to Stores where they can purchase groceries, if the employer is providing cooking and

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kitchen facilities.

**ITEM # 14, REFERRAL INSTRUCTIONS:** *(Include here who an applicant or State Employment Service Representative should contact concerning employment and how that person may be reached)*

Interested workers may contact Greg York at (845)707-8384 for a phone interview or by mail at:

Thanksgiving Farm at The Center for Discovery  
c/o Greg York  
P.O. Box 840 Harris, NY 12742

**ITEM # 11, ANTICIPATED HOURS OF WORK**

8 hours of work per day is normal. The worker may be requested but not required to work more hours per day and/or on the Sabbath or Federal holidays.

**ITEM # 15, JOB SPECIFICATIONS:** *(Include here any general crop conditions and work duties not listed on ETA 790, Item #11)*

Drive and operates farm machines to grow and harvest vegetables including artichokes, broccoli, beets, carrots, cabbage, celeriac, celery, eggplant, and garlic. Attaches farm implements to tractor, and drives tractor while operating implements on the field. To till soil, plant, cultivate and fertilize a large variety of crops. Thins & weeds plants using hoes and shovels or power drawn implements. Each worker must have 6 months verifiable work experience driving 110 hp (and/or larger) tractors. The workers will be driving tractors, assembling and moving irrigation equipment, applying spray materials to a large variety of crops for insect, disease, weed control, and as fertilizers. During the fall they will be working in greenhouses also planting, harvesting, and cleaning. Must be able to bend, stoop, and stand on feet for long periods of time. Because the farm is part of a treatment center and school for individuals with disabilities, and farm work is included as part of the program for residents, farm workers must also be able and willing to interact effectively and safely with disabled individuals who are part of the therapeutic program. Workers will be required to work in a multidisciplinary, therapeutic environment.

Conduce y opera máquinas agrícolas para crecer y verduras de cosecha, incluyendo las alcachofas, brócoli, remolacha, zanahoria, repollo, apio, el apio, la berenjena y el ajo. Concede granja implementos para tractor, tractor y aperos de unidades mientras que operan en el campo. Para labrar tierra, sembrar, cultivar y fertilizar una gran variedad de cultivos. Thins malas hierbas y plantas que utilizan azadas y palas eléctricas o implementos de tracción. Cada trabajador debe tener experiencia de 6 meses de trabajo verificable conducción 110 caballos de fuerza (y / o más grande) tractores. Los trabajadores estarán conduciendo tractores, montaje y equipos de movimiento de riego, la aplicación de materiales de pulverización a una gran variedad de cultivos para los insectos, las enfermedades, control de malezas, y como fertilizantes. Durante el otoño se va a trabajar en los invernaderos también la plantación, cosecha y limpieza. Debe ser capaz de doblarse, agacharse, y ponte en pie durante largos períodos de tiempo. Debido a que la granja es parte de un centro de tratamiento y la escuela para las personas con discapacidad y el trabajo agrícola se incluye como parte del programa para los residentes, los trabajadores agrícolas también deben ser capaces y estar dispuestos a interactuar de forma efectiva y segura con las personas con discapacidad que forman parte de la programa terapéutico. Se requerirá a los trabajadores a trabajar en un entorno multidisciplinar, terapéutico.

All terms and conditions included in this job order will apply to all workers, domestic and foreign, employed under this job order.

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~~Worker will be expected to meet the following production standards if applicable: (list the production standards for each activity if production standards are applicable)~~

**ITEM #16, WAGE RATES, SPECIAL PAY INFORMATION AND DEDUCTIONS:**

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The Adverse Effect Wage Rate ("AEWR") of \$ ~~10.91~~ <sup>#11.26</sup>, the prevailing hourly wage or piece rate, the agreed-upon collective bargaining wage, or the Federal or State minimum wage, except where a special procedure is approved for an occupation or specific class of agricultural employment, whichever is greatest, will be the minimum rate of pay for all employees. Employer assures that if a change in the AEWR requires an increase in the guaranteed minimum, such increase will be paid as of the effective date of the increase. If the worker's piece rate earnings for a pay period results in average hourly earnings of less than the guaranteed minimum, the worker will be provided make-up pay to the guaranteed minimum rate.

This job offer includes the following crop activities and rates of pay per unit: (Include all crops and activities not listed on ETA 790, Item #9, along with piece rates and units of measure)

Crop Activity	Flat Rate (i.e., hr. wk.)	Piece Rate	Unit	Est. Hourly Equiv. C/L Wage Rate
Celeriac	\$ <del>10.91</del> /hr			
Celery	\$ <del>10.91</del> /hr			
Eggplant	\$ <del>10.91</del> /hr			
Garlic & Scapes	\$ <del>10.91</del> /hr			
see ETA 790 Attachment #16-pg. 2 for continued list				

#11.26/hr

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No deductions will be made which would bring the employee's hourly wage below the Federal Minimum Wage.

The employer will \_\_\_\_\_ OR will NOT **XXX** pay the worker a bonus of \$ \_\_\_\_\_, based on \_\_\_\_\_.

Payroll Periods will be **XXX** weekly OR \_\_\_\_\_ twice MONTHLY. Workers will be provided with an earnings statement, which contains at a minimum, the hours actually worked, total earnings, and all deductions. The statements will comply with 20CFR 655.122 (j)-(m)

Employer guarantees to offer employment for a minimum of 3/4 of the workdays of the total specified period during which the work contract and all extensions thereof are in effect, beginning with the first day after worker arrives at place of employment and ending on the expiration date specified in the work contract or extensions thereof. In an ACT of GOD termination, the 3/4 guarantee period ends on the date of termination. The employer will make efforts to transfer the worker to other comparable employment acceptable to the worker, consistent with existing immigration law, as applicable in accordance with 20 CFR 655.122(0). Whether such an event constitutes a contract impossibility will be determined by the CO.

Employer will provide a worker referred through the Surface Transportation Board a full week's work for the week beginning with the anticipated date of need, unless employer has amended the date of need by notifying the local office no later than 10 days before the date of need. If the

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State Workforce Agency  
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1. worker's total earnings for the pay period.
2. worker's hourly rate and/or piece rate of pay.
3. hours of employment offered to worker (in accordance w/ the 3/4 guarantee).
4. hours actually worked by worker.
5. itemization of all deductions made from worker's wages.
6. if piece rates are used, the units produced daily.
7. beginning and end dates of the pay period
8. employer's name, address, and FEIN

employer fails to notify the order-holding office, then the employer shall pay an eligible worker referred through the clearance system for the first week starting with the originally anticipated date of need. If a worker referred through the interstate clearance system fails to notify the order-holding office of continued interest in the job at least 5 days before the date of need, the worker will be disqualified from the above mentioned assurance. Alternate work may be provided if the guarantee cited in this section is invoked.

The employer will provide WORKER'S COMPENSATION INSURANCE, at no cost to the worker, covering injury and disease, arising out of and in the course of, the worker's employment.

**ITEM #16 Cont. WAGE RATES, SPECIAL PAY INFORMATION & DEDUCTIONS:**

Employer will not deduct for Federal Taxes for foreign workers, but will make the following deductions: Advances \_\_\_\_\_ Meals \_\_\_\_\_ Other \_\_\_\_\_ Explain: N/A

No deductions will be made which will bring the employee's hourly wage below the Federal Minimum Wage. (Reference: Internal Revenue Service, Publication 51 Circular A, Agricultural Employer' Tax Guide).

Employer will provide worker referred through the Interstate clearance system 40 Hours of work for the week beginning with the anticipated date of need, unless employer has amended the date of need by notifying the local office no later than 10 days before the date of need. If employer fails to notify the order-holding office, then employer shall pay an eligible worker referred through the clearance system \$ 10.91 hr. for the first week starting with the originally anticipated date of need. Employer will will not ~~XXX~~ require worker to perform alternative work if the guarantee cited in this section is invoked. The alternative work and pay are: \_\_\_\_\_

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If worker referred fails to notify the order-holding office of continued interest in the job at least 5 days before the date of need, worker will be disqualified from the above-mentioned assurance.

**ITEM #17 TRANSPORTATION ARRANGEMENTS**

The employer will provide advance transportation for reasonable (most economical) common carrier or other transportation which conforms to the Interstate Commerce Commission (ICC) inbound transportation (if it is the prevailing practice). If not the prevailing practice, the employer will reimburse the worker for transportation costs and subsistence to the employer's work site when the worker completes 50% of the work period.

Workers who voluntarily quit or are terminated for cause prior to completing 50% of the contract period will be required to reimburse the employer for the full amounts of transportation and subsistence which were advanced and/or reimbursed to the worker.

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\$ 11.58

After worker has completed 50% of the work contract period, employer will reimburse worker for the cost of transportation and subsistence from the place of recruitment to the place of employment. Upon completion of the work contract, employer will pay reasonable costs of return transportation and subsistence (travel reimbursement subsistence will be the minimum amount of \$11.42 per 24-hour period of travel and the maximum amount will be \$46.00 per day with receipts as the maximum amount to be reimbursed for their transportation subsistence

expenses) from place of employment to place of recruitment, except when the worker will not be returning to place of recruitment, due to subsequent employment with another employer who agrees to pay such costs, in which case the employer will only pay for the transportation and subsistence to the next job. The amount of the transportation payment will be equal to the most economical and reasonable similar common carrier transportation charges for the distance involved. Free transportation will be provided to and from the housing to the work site each day.

**OTHER CLARIFICATIONS AND ASSURANCES:**

**ASSURANCE:** The employer agrees to abide by the regulations at 20 CFR 653.501 and 20 CFR 655.135, 20 CFR 653.701.

**EXTENSION OF EMPLOYMENT:** No extension of employment beyond the period of employment specified in the job order shall relieve the employer from paying the wages already earned, or if specified in the job order as a term of employment, providing return transportation or paying return transportation expenses to the worker.

**TERMS AND CONDITION CHANGES:** The employer will expeditiously notify the order holding office or the State agency by telephone 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.

**OUTREACH WORKERS:** Outreach workers shall have reasonable access to the worker in the conduction of outreach activities pursuant to 20 CFR 653.501 and 20 CFR 655.135, 20 CFR 655.701.

**CONTRACT IMPOSSIBILITY:** The employer will terminate the work contract of any worker whose services are no longer required for due to an ACT of GOD. In the event of such termination, the employer will be bound by the 3/4's guarantee from the first work day after arrival to the date of termination. The employer will make efforts to transfer the worker to other comparable employment acceptable to the worker, consistent with existing immigration law as applicable in accordance with 20 CFR 655.122(0)

**TERMINATIONS:** The employer may terminate the worker with notification to the Employment Service, if the worker: (a) refuses work without justified cause to perform work for which the worker was recruited and hired; (b) commits serious acts of misconduct; or (c) fails, after completing any training or break-in period, to reach production standards when production standards are applicable.

In the event of termination for medical reasons occurring after arrival on the job, or occurring as a result of employment, or in the event of termination resulting from an ACT of GOD, the employer will pay or provide reasonable costs of return transportation and subsistence to the place from which the worker came to work for the employer and reimburse worker for reasonable costs of transportation and subsistence incurred by the worker to get to the place of employment.

**EMPLOYER FURNISHED TOOLS AND EQUIPMENT:** The employer will furnish, without cost, all tools, supplies, or equipment required in the performance of work.

**INJURIES:** The employer will provide Workers Compensation Insurance or equivalent employer provided insurance, at no cost to the worker, covering injury and disease arising out of, and in the course of, the worker's employment. Employer's proof of insurance coverage will be provided to the ETA field office before certification is granted.

**PROOF OF CITIZENSHIP:** All workers hired under this order will be required to provide documentation attesting to U.S. citizenship or legal status to work in the U.S.

**AGRICULTURAL WORK AGREEMENT:** A copy of the agricultural work agreement contract or the ETA 790 and attachments will be provided to the worker by the employer no later than on the day work commences.

**NUMBER OF WORKERS:** The employer expects the total number of workers to be used in this occupation to be 7, of which 7 will be H2-A workers for which certification is requested, and the balance will be domestic workers. These numbers are only estimates, as the total workforce needs are dependent upon weather, crop conditions, and worker availability.

**OTHER:** The working conditions will comply with applicable Federal and State minimum wage, child labor, social security, health and safety, farm labor contractor registration and other employment-related laws. The employer is an Equal Employment Opportunity employer and will offer U.S. workers at least the same opportunities, wages, benefits, and working conditions as those which the employer offers or intends to offer to non-immigrant workers.

Worker will be expected to meet the following production standards if applicable: (list the production standards for each activity if production standards are applicable) N/A

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Issued by NYS Insurance Fund  
policy E1424-921-3

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12/18/14

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All terms and conditions included in this job order will apply to all workers, domestic and foreign, employed under this job order.

**WORK RULES**  
**for**  
**Thanksgiving Farm at the Center for Discovery**

These work rules are not intended to be a complete list of rules. However, these work rules will help provide guidance to workers concerning 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 termination of the worker's employment. Penalties such as suspension from work opportunity for the remainder of the day, or for up to three days, may be made in the case of less serious violations.

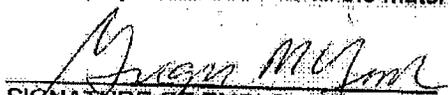
Workers are expected to comply with all rules relating to discipline, attendance, work quality, effort, and the care and maintenance of all property provided to them by the employer.

1. Workers must follow the supervisor's instructions. Insubordination or failure to regard authority will not be tolerated.
2. The employer will train workers in all aspects of planting and harvesting of crops (as specified in Item #15, Job Specifications) for (2) days (16 working hours), as well as in understanding and cooperating with the employer's therapeutic program involving individuals with disabilities with whom workers may be required to interact in an effective and safe manner as part of a multidisciplinary, team oriented program.
3. Workers who do not perform work as per supervisor's instructions may be suspended without pay for the remainder of the work day or for up to (5) days at one time. This is the sole judgment of the supervisor, depending upon the degree and seriousness of the infraction. The worker's prior record and other relevant factors will be considered before any disciplinary action is taken.
4. No use or possession of beer, liquor, unlawful drugs or weapons is permitted during work time or during any work day before work is completed for the day (such as during meals). Workers may not report to work under the influence of alcohol or drugs. Illegal drugs may not be used or kept on any employer premises, including housing. Use or possession of illegal drugs, failing or refusing to take a drug test post hire, excessive use of alcohol, will usually result in immediate termination.
5. Employees are expected to be present, able, and willing to perform the assigned work every scheduled work day before work is completed for the day. This is not sporadic or "day work". Excessive absences will not be tolerated. Excessive absences is considered five (5) consecutive days of un-excused absences or five (5) absences in a 30 day period.
6. Workers shall maintain any living quarters provided to them in a clean and consistent manner. Workers will cooperate with other workers assigned to such housing and agree to assist in maintaining common kitchen and living areas.
7. Workers living in employer's housing assigned to bunk beds may not separate bunk beds as floor space in sleeping rooms is needed by all occupants.
8. Workers living in employer's housing may not cook in sleeping rooms or any other non-kitchen and living areas.
9. Workers may not drop paper, cans, bottles or other trash in fields, packing house area or on housing premises. Trash and waste receptacles must be used.
10. Workers may not leave the field or other assigned work areas without permission of employer or supervisor.

**CLEARANCE ORDER ASSURANCES**  
**(20 CFR 653.501)**

By filing and interstate clearance order, the employer agrees to abide by the interstate clearance order regulations and makes the following assurances:

1. The employer will provide workers referred through the employer's Clearance Order with a full week of employment for the week beginning with the date of need stated in Item #9 of the Clearance Order, unless the employer amends such date of need at least 10 working days prior, by so notifying the appropriate ES office. The employer will pay workers recruited through this Clearance Order the rate specified in the Clearance Order for the first weeks starting with the original date of need. The employer retains the option, however, of requiring the worker to perform the alternative work specified in the Clearance Order, if the guarantee in this section is invoked.
2. In the event that the period of employment is extended beyond that specified in the Clearance Order, the employer will not be relieved from paying the wage already earned, and from providing transportation or paying transportation expenses as provided in the Clearance Order regulations.
3. The working conditions of this job offer comply with applicable Federal and State minimum wage, child labor, social security, health and safety, migrant and seasonal farm worker and other employment related laws.
4. The employer will expeditiously notify the appropriate ES office by telephone upon learning that his/her crop is maturing earlier or later, or that weather conditions, over recruitment, or other factors have changed the terms and conditions of employment being offered by the employer.
5. The employer, if acting as a Farm Labor Contractor (FLC) or Farm Labor Contractor Employer (FLCE) on the order, has a valid FLC certificate or FLCE identification card.
6. The employer will provide housing which meets Federal standards and is sufficient to house the number of workers requested through the Clearance System. The housing will be provided at no cost to the workers who are referred on this order, and when applicable, family members, as provided in Item #3 of the Clearance Order, who are unable to return to their residence on the same day.
7. Employment Service staff (including outreach workers) shall have reasonable access to workers in the conduct of outreach activities.
8. This job order describes the actual terms and conditions of the employment being offered by the employer and contains all the material terms and conditions of the job.

  
SIGNATURE OF EMPLOYER

12/13/14  
DATE

REFERRAL INSTRUCTIONS

Potential U.S. workers (referrals) will be accepted from the local Job Service Office, through word-of-mouth, gate hires (walk-up workers), and other sources. All applicants should be thoroughly familiarized with the job specifications and terms and conditions of employment on the job order. Only workers meeting all qualifications on the job order should be referred by the Job Service Office. In the event the employer receives phone calls or walk-up workers interested in the job offer, the employer must inform the worker of the job requirements and duties, must consider the worker for the job based on the workers qualifications, and must report the results in the final recruitment report submitted to the U.S. Department of Labor.

The best days and times of day for the local Job Service Office to contact the employer concerning referrals as follows:

X M X T X W X TH X F From 8:00 am to 11:00 am and From 1:00 pm to 5:00 pm  
M T W TH F From :00 am to :00 am and From :00 pm to :00 pm  
M T W TH F From :00 am to :00 am and From :00 pm to :00 pm  
M T W TH F From :00 am to :00 am and From :00 pm to :00 pm

The scheduling of the employer's personal and telephone interviews of referrals will be coordinated by the employer with the local job service office. Personal interviews may be conducted at the local job service office.

ASSURANCE OF RENEWAL OF WORKER'S COMPENSATION COVERAGE DURING WORK CONTRACT PERIOD

This serves as an assurance that should I receive certification of my H-2A application, I will have a valid worker's compensation insurance policy during the job contract period for any worker I employ under the H-2A program. Additionally, once I purchase my worker's compensation insurance coverage, I will provide to your office the company's name, policy number, and effective dates.

This also serves as an assurance that should my worker's compensation insurance policy expire during the work contract period in which I employ workers under the H-2A program, I will renew my worker's compensation insurance policy to cover the workers.

Additionally, once I do renew the worker's compensation policy, I will provide the company's name, policy number, and effective dates to the Certifying Officer, U.S. Department of Labor, Employment and Training Administration, at the address listed in ETA 790, Item #19.

REQUEST FOR CONDITIONAL ACCESS INTO INTERSTATE CLEARANCE SYSTEM

I, Gregory York, hereby request permission for conditional entry into the interstate clearance system so that my job order can be transmitted to labor supply states in a timely manner and facilitate the recruitment of domestic workers.

As a condition for placing my order into interstate clearance, I assure that my housing will meet such standards as are agreed upon to fulfill the requirement of the U.S. Secretary of Labor for the use of the Employment Service facilitate for interstate clearance orders.

I also authorize representatives of the State Employment Service, the State Health Department, and/or the U.S. Employment and Training Administration to inspect the housing that I am offering such workers at any reasonable time to verify its condition. I expect my housing to be occupied by 2/15/2015.

Based upon the above data, my housing will meet applicable standards by 1/15/2015 (30 days prior to anticipated occupancy date).

Gregory York  
SIGNATURE OF EMPLOYER

12/13/14  
DATE

December 12th, 2014

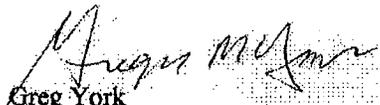
## Thanksgiving Farm at The Center for Discovery

**Please see below, the farmers reasoning for requesting six months experience:**

Thanksgiving Farm engages in the farming of a large variety of vegetables. A part of the workers responsibilities are to drive and operate farm machinery and attach farm implements. This is not a highly skilled position but does indeed require at least six months experience to perform these job duties.

There is a very large safety factor involved in the request for workers to have a minimum of six months job related experience. There is a large liability for the farmer and for the worker to hurt himself, other co-workers, or both that could arise from an accident involving a worker (s) that requires sound judgment and experience to operate and drive farm machinery.

Please research to find that the same SIX MONTHS was requested and granted last season for our workers. This approval insured that there were no accidents involving the operation of farm machinery and it helps solidify our reasoning to do the best we can to care for and help avoid accidents arising from the operation of farm machinery by inexperienced operators / workers.

  
Greg York  
Head Farmer

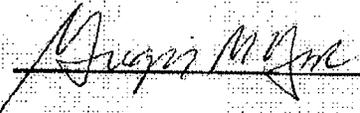
**Thanksgiving Farm at The Center for Discovery  
c/o Greg York  
P.O. Box 840  
Harris, NY 12742**

20 CFR 655.135 (d)

**FIFTY-PERCENT RULE**

Thanksgiving Farm requests an exemption from the fifty-percent rule under 655.135 (d). Thanksgiving Farm did not, during any calendar quarter during the preceding calendar year, use more than 500 "man-days" of agricultural labor, as defined in section 3(u) of the Fair Labor Standards Act of 1938 (29 USC 203(u)). Thanksgiving Farm is not a member of an association which has applied for a temporary alien agricultural labor certification under this subpart for its members and has not otherwise "associated" with other employers who are applying for H-2A workers under this subpart.

Employers Signature



Date

12/13/14

\$11.26

\$ ~~11.22~~/hr

ETA 790 Attachment, Item #16

Crop Activity	Flat Rate all ↓	Piece Rate	Unit	Est. Hourly Equiv.	C/L Wage Rate
Onions	\$11.06/hr.				
Sweet Peppers	\$11.06/hr.				
Hot Peppers	\$11.06/hr.				
Potatoes	\$11.06/hr.				
Rutabagas	\$11.06/hr.				
Scallions	\$11.06/hr.				
Green Beans	\$11.06/hr.				
Haricot verts	\$11.06/hr.				
Yellow Wax Beans	\$11.06/hr.				
Summer squash	\$11.06/hr.				
Winter squash	\$11.06/hr.				
Tomatoes	\$11.06/hr.				
Cherry Tomatoes	\$11.06/hr.				
Fava Beans	\$11.06/hr.				
Peas	\$11.06/hr.				
Sweet Corn	\$11.06/hr.				
Radishes	\$11.06/hr.				
Zucchini blossoms	\$11.06/hr.				
Strawberries	\$11.06/hr.				
Turnips	\$11.06/hr.				
Leeks	\$11.06/hr.				
Cucumbers	\$11.06/hr.				
Kohlrabi	\$11.06/hr.				
Melons	\$11.06/hr.				
Thyme	\$11.06/hr.				
Rosemary	\$11.06/hr.				

#11.26

~~\$11.26/hr~~ ETA 790 Attachment, Item #16  
/hr - all

Tarragon	\$11.06/hr.				
Chives	\$11.06/hr.				
Fennel	\$11.06/hr.				
Dill	\$11.06/hr.				
Cilantro	\$11.06/hr.				
Chervil	\$11.06/hr.				
Lemon thyme	\$11.06/hr.				
Sage	\$11.06/hr.				
Oregano	\$11.06/hr.				
Basil	\$11.06/hr.				
Mint	\$11.06/hr.				
Peppermint	\$11.06/hr.				
Lemon verbena	\$11.06/hr.				
Flat parsley	\$11.06/hr.				
Arugula	\$11.06/hr.				
Arugula Sylvetta	\$11.06/hr.				
Escarole	\$11.06/hr.				
Radicchio	\$11.06/hr.				
Salad mix	\$11.06/hr.				
Head Lettuces	\$11.06/hr.				
Spinach	\$11.06/hr.				
Mache	\$11.06/hr.				
Swiss chard	\$11.06/hr.				
Kale	\$11.06/hr.				
Collards	\$11.06/hr.				
Snow pea shoots	\$11.06/hr.				
Tatsoi	\$11.06/hr.				
Bok Choy	\$11.06/hr.				
Braising greens	\$11.06/hr.				

\$ 11.26

**ETA 790 Attachment, Item #16**

~~11.22~~/hr - all

Frisee	<del>\$11.06/hr.</del>				
Mizunas	<del>\$11.06/hr.</del>				

MB

~~12/18/14~~  
12/19/14

## LETTER OF AUTHORIZATION

I authorize Mr. Todd Miller, of Head Honchos, LLC, to act as my agent for the purpose of processing all documentation in order for my company and/or farm to obtain H2 visas through the H2 program.

Please send all correspondence to:

Todd Miller, Agent

OR

P.O. Box 1073

Helotes, TX 78023

Phone: (210) 695-1648

FAX: (210) 695-6287

*For overnight delivery:*

25711 Coronado Ridge

San Antonio, TX 78260

### SECONDARY CONTACT

If Todd Miller is not reachable, Amanda Proux is also authorized to act for Todd Miller and/or Head Honchos on behalf of the Petitioner/ Owner.

Amanda Proux email: [ajproux@yahoo.com](mailto:ajproux@yahoo.com)

Amanda Proux phone: (210) 412-3564

Thank you,



Petitioner/ Owner

(signature)

STATE OF NEW YORK - WORKERS' COMPENSATION BOARD  
ESTADO DE NUEVA YORK - JUNTA DE COMPENSACION OBRERA

www.wcb.ny.gov  
Statewide Fax Line: 877-533-0337

NOTICE OF COMPLIANCE

AVISO DE CUMPLIMIENTO

TO EMPLOYEES

A EMPLEADOS

IMPORTANT INFORMATION FOR EMPLOYEES WHO ARE INJURED OR SUFFER AN OCCUPATIONAL DISEASE WHILE WORKING.

INFORMACION IMPORTANTE PARA EMPLEADOS QUE SEAN LESIONADOS O SUFRAN UNA ENFERMEDAD OCUPACIONAL MIENTRAS TRABAJAN.

1. By posting this notice and information concerning your rights as an injured worker, your employer is in compliance with the Workers' Compensation Law.
2. If you do not notify your employer within 30 days of the date of your injury your claim may be disallowed, so do so immediately.
3. You are entitled to obtain any necessary medical treatment and should do so immediately.
4. You may choose any doctor, podiatrist, chiropractor or psychologist referred by a medical doctor that accepts NY State Workers' Compensation patients and is Board authorized. However, if your employer is involved in a certified preferred provider organization (PPO) you must first be treated by a provider chosen by your employer and your employer must give you a written statement of your rights concerning further medical care.
5. You should tell your doctor to file copies of medical reports concerning your claim with the Workers' Compensation Board and with your employer's insurance company, which is indicated at the bottom of this form.
6. You may be entitled to lost time benefits if your work-related injury keeps you from work for more than seven days, compels you to work at lower wages or results in permanent disability to any part of your body. You may be entitled to rehabilitation services if you need help returning to work.
7. You should not pay any medical providers directly. They should send their bills to your employer's insurance carrier. If there is a dispute, the provider must wait until the Board makes a decision before it attempts to collect payment from you. If you do not pursue your claim or the Board rules that your injury is not work-related, you may be responsible for the payment of the bills.
8. You are entitled to be represented by an attorney or licensed representative, but it is not required. If you do hire a representative do not pay him/her directly. Any fee will be set by the Board and will be deducted from your award.
9. If you have difficulty in obtaining a claim form or need help in filling it out, or if you have any other questions or problems about a job-related injury, contact any office of the Workers' Compensation Board.

1. Su patrono está cumpliendo la Ley de Compensación Obrera cuando despliega este comunicado concerniente a sus derechos como trabajador lesionado.
2. Si usted no notifica a su patrono dentro del término de 30 días de haber sufrido su lesión su reclamación podría ser desestimada, por eso notifique inmediatamente.
3. Usted tiene derecho a recibir cualquier tratamiento médico necesario relacionado con su lesión y debe gestionarlo inmediatamente.
4. Para el tratamiento de cualquier lesión o enfermedad relacionada con el trabajo, usted puede escoger cualquier médico, podiatra, quiropráctico o psicólogo (si es referido por un médico autorizado) que esté autorizado y acepte pacientes de la Junta de Compensación Obrera. Sin embargo, si su patrono está autorizado a participar una organización certificada de proveedores preferidos (PPO) usted deberá obtener tratamiento inicial para cualquier lesión o enfermedad relacionada con el trabajo de la correspondiente entidad. Patronos que participen en cualquier de estos programas establecidos por ley están obligados a proveer a sus empleados notificación escrita explicando sus derechos y obligaciones bajo el programa a que esté acogido.
5. Usted deberá requerir de su Médico que radique copias de los informes médicos de su caso en la Junta de Compensación Obrera y en la compañía de seguros de su patrono, que se indica al final de esta forma.
6. Usted tiene derecho a compensación si su lesión relacionada con el trabajo le impide trabajar por más de siete días, le obliga a trabajar a sueldo más bajo ó resulta en incapacidad permanente de cualquier parte de su cuerpo. Usted puede tener derecho a servicios de rehabilitación si necesita ayuda para regresar al trabajo.
7. No pague a ningún proveedor médico directamente por tratamiento de su lesión o enfermedad relacionada con el trabajo. Ellos deben enviar sus facturas al asegurador de su patrono. Si el caso es cuestionado, el proveedor deberá esperar hasta que la Junta decida el caso, antes de iniciar gestión de cobro alguna contra usted. Si usted no tramita su caso ó la Junta falla que su lesión o enfermedad no está relacionada con el trabajo, usted podría ser responsable del pago de las facturas.
8. No es obligatorio el estar representado en ninguno de los procedimientos de la Junta, pero es un derecho que usted tiene, el estar representado por abogado ó por representante licenciado si usted así lo desea. Si es representado, no pague al abogado ó al representante licenciado. Cuando la Junta decida su caso, los honorarios serán determinados por la Junta y descontados de sus beneficios.
9. Si tiene dificultad en conseguir un formulario de reclamación ó necesita ayuda para llenarlo ó tiene dudas sobre cualquier situación relacionada con una lesión ó enfermedad comuníquese con la oficina mas cercana de la Junta.

WORKERS' COMPENSATION BOARD OFFICES

Albany, 12241 - 100 Broadway-Menands - (866) 750-6157  
\*Brooklyn, 11201 - 111 Livingston St. - Brooklyn - (800) 877-1373  
Binghamton, 13901 - State Office Bldg.-44 Hawley St. - (866) 802-3604  
Buffalo, 14202 - 369 Franklin Street - (866) 211-0645  
\*Hauppauge, 11788 - 220 Rabro Drive - Suite 100 - (866) 681-5354  
\*Hempstead, 11550 - 175 Fulton Avenue - (866) 805-3630  
\*New York, 10027 - 215 W.125th St. - Manhattan - (800) 877-1373  
\*Peekskill, 10588 - 41 North Division St. - (866) 746-0552  
\*Queens, 11432 - 188-46 91st Ave. - Jamaica (800) 877-1373  
Rochester, 14614 - 130 Main Street West - (866) 211-0644  
Syracuse, 13203 - 935 James St. - (866) 802-3730

\*DOWNSTATE MAIL ADDRESS Claims-related mail for the Hauppauge, Hempstead, Peekskill and all NYC offices should be mailed to: PO Box 5205 Binghamton, NY 13902-5205

*Robert E. Belton*

Robert E. Belton  
Chair (Presidente)

Workers' Compensation Benefits, when due, will be paid by (Los beneficios de Compensación Obrera, cuando debidos, serán pagados por):

THE STATE INSURANCE FUND  
199 Church Street, New York, N. Y. 10007  
(212) 312-8000

Effective From 07/01/2014 To cancellation  
(En Vigor Desde) (Hasta cancellation)  
Policy No. E 1424 921-3  
(Poliza No.)

Name of employer (Nombre de patrono)

THE CENTER FOR DISCOVERY INC  
BENMOSCHE RD  
PO BX 840 ATTN: JOYCE MILLER  
HARRIS NY 12742

THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.

Failure by an employer to post this notice in and about the employer's place or places of business may result in a \$250 penalty for each violation.

C-105 (08-2009)

S. I. F. U-30  
"U885178N"

PRESCRIBED BY CHAIR  
WORKERS' COMPENSATION BOARD  
STATE OF NEW YORK

www.wcb.ny.gov