

IFQ OFFER FORM

_____ Units of Halibut Sablefish Quota Shares
designated as _____ - _____ - _____
_____ through _____

Offer
Amount of offer \$ _____ Cash
 INV Financing
 Non-INV Financing

Contact Information IFQ must be transferred into the name of the person making the offer

Name: _____
Mailing Address: _____
Email Address: _____
Home Telephone Number: _____
Work Number: _____ Cell Phone Number: _____

The Division of Investments (INV) reserves the right to accept or refuse any and all offers. Decisions by INV are final. This sale is governed by 3 AAC 77.010.900. INV reserves the right to request additional information to complete or supplement any offer. All offers will be reviewed. Offers are not binding unless accepted by INV in writing and are subject to approval of the Restricted Access Management (RAM).

IFQs can only be purchased by an individual who meets the eligibility requirements of 50 C.F.R. § 679.41.

The exact terms of the sale will be set at the time an offer is accepted.

Signature

_____ Date _____
Authorized Signature

DIVISION OF INVESTMENTS PROCESSING ONLY - DO NOT WRITE BELOW THIS LINE

DATE RECEIVED