

Citrus Administrative Committee
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 Telephone 863-682-3103 * Fax 863-683-9563
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REPORT OF SHIPMENTS UNDER REPACKING CERTIFICATE OF PRIVILEGE
 As required by Federal Marketing Order No. 905 regulating shipments of Fresh Florida Citrus

Shipped to _____ Address _____

Truck License No. _____ Shipping Date _____ Certificate No. _____

Variety of Citrus Fruit	Number of Containers	Fruit Size	Type of Container	Size of Container	Manifest Number
		<input type="text"/>			
		<input type="text"/>			
		<input type="text"/>			
		<input type="text"/>			
		<input type="text"/>			
		<input type="text"/>			
Total containers	<input type="text"/>				

The undersigned certifies to the Committee and the Secretary of Agriculture that this citrus shipment is being shipped in accordance with current Marketing Order No. 905 Regulations for Repacking. I (we) realize that the making of a false statement, knowing it to be false, is a violation of Title 18, Section 1001, of the United States Code, among other statues, which provide for fine and imprisonment.

Repacking Shipper _____ Repacking Certificate of Privilege No. _____
 20__-20__ Season
 Address _____ City _____ FL _____

Signature of Repacking Shipper _____

Instructions to Repacking Shipper. Fill out this report for each repacked shipment. Sign all copies and mail white copy to the Committee, Pink copy goes with the shipments and you retain the canary copy for your files and the Goldenrod copy is for the trucker.

(See Reverse Side)

Note: The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 552a) and the Paperwork Reduction Act of 1995. The authority for requesting this information to be supplied on this form is the Agricultural Marketing Agreement Act of 1937, Secs. 1-19, 48 Stat. 31, as amended, (7 U.S.C. 601-674). Furnishing the requested information is necessary for the administration of the marketing order program.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0189. The time required to complete this information collection is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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