APPLICATION FOR REIMBURSEMENT OF ASSESSMENT

CHRISTMAS TREE PROMOTION, RESEARCH AND INFORMATION ORDER (7 CFR PART 1214)

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 Commodity Promotion, Research, and Information Act of 1996, Pub. L. 104-127, 110 Stat. 1032 (7 U.S.C. 7411-7425).

PLEASE READ THE INSTRUCTIONS OF APPLICATION BEFORE COMPLETION (PLEASE TYPE OR PRINT)

Name of Applicant	Title	Business Telephone No. (include Area code) Tax ID# or SS#	
Name of Business			
Business Address C	City	State	Zip
Dasiness Adaress	,	State	2.6
(Importer No. or Broker No.)	(Certificate of Exemption No.)		
Port of Entry and Entry No. for Imported Christmas Trees	Entry Date of Imported Christmas Trees	Number of Christmas Trees on which assessments were paid	Amount of Assessment Collected
	Total amount of assessme	ent collected to be reimbur	rsed:
A reimbursement is hereby requestervice or paid by importers on a paid to the Christmas Tree Promethat the above information provito the best of my knowledge and above listed Christmas trees. If behalf of the aforementioned but	Christmas trees that should hotion Board on the above-desided in this application for reill have not previously applieurther certify that I am autho	ave been exempted scribed Christmas tre mbursement is true d for a reimburseme	but was ees. I certify and correct nt on the
Name of Applicant (Print)	Title		
Signature of Applicant	 	te	

1/ Any false statement or misrepresentation may result in a fine of not more than \$10,000, or imprisonment for not more than 5 years, or both (18 U.S.C. 1001).

INSTRUCTIONS

RECEIPTS OR COPIES THEREOF MUST BE ATTACHED TO THIS APPLICATION
Return to the: Christmas Tree Promotion Board
Street
City, State, Zip Code

Receipts or copies thereof, submitted with this application will not be returned. Type or Print this application. Attach additional pages if necessary.

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-NEW. The time required to complete this information collection is estimated to average 15 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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