

RAISIN ADMINISTRATIVE COMMITTEE  
 2445 Capitol Street, Suite 200  
 Fresno, California 93721  
 Phone: (559) 225-0520

**EXPORT PROGRAM APPLICATION/DEPOSIT**

The undersigned Packer hereby requests approval by the Raisin Administrative Committee (RAC) of this application. It is understood that upon such approval the Packer has agreed to purchase, and the RAC has agreed to sell, the quantity of natural condition raisins specified herein for use in fulfilling the sales contract described below, such purchases and sales to be subject to the terms and conditions of the above named agreement and offer.

**Variety Type: Naturals**

Pack Style	No. of Cases	Packed Weight	Replacement Factor*	Total Qualified Packed Weight
Total Qualified Packed Weight				

**Natural Condition Weight**

Shrinkage Allowance/		
Total Packed Weight (lbs)	_____	
Gross Amount at \$	_____	\$ _____
Less: State Advertising at \$	_____	\$ _____
Amount Due		\$ _____

Country \_\_\_\_\_  
 Exporter/Importer \_\_\_\_\_  
 Intended Shipment Date \_\_\_\_\_  
 \*See Instructions \_\_\_\_\_  
 Packer Reference Number \_\_\_\_\_  
 \*\*See Instructions \_\_\_\_\_

Must agree with Reference No. on Truck & Ocean Bills of Lading

The making of any false statement or representations in any matter within the jurisdiction of any agency of the United States, knowing it to be false, is a violation of title 18, section 1001 of the United States Code, which provides for a penalty of a fine or imprisonment of not more than five years, or both.

Packer: \_\_\_\_\_  
 By: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 \_\_\_\_\_

<b>FOR RAC USE ONLY</b>	
Date	_____
Check No.	_____

**INSTRUCTIONS FOR COMPLETING FORM RAC-100**

No cash adjustment payment will be made by the RAC for free tonnage raisins exported until an application is received from the Packer. (7 U.S.C. 608(d), 7 C.F.R. 989.67). The Packer must furnish all information provided for in the form except that specified under “FOR RAC USE ONLY.”

<b>Varietal Type</b>	Use terminology specified in section 989.11 of Marketing Order No. 989, as amended.
<b>Pack Style</b>	Specify the packed configuration of the cases shipped, such as “30 lbs.,” “48/15 oz.,” or “36/125 gm.”
<b>No. Cases</b>	Specify the number of cases applied for as shipped for the specified pack style.
<b>Packed Weight</b>	Multiply the net weight per case by the number of cases shipped (No. Cases).
<b>Replacement Factor</b>	See Exhibit attached to current circular.
<b>Qualified Packed Weight</b>	Equals “packed weight” multiplied by “replacement factor.”
<b>Natural Condition Weight</b>	Equals the sum of the “total qualified weight” divided by the shrink factor as specified in the Export Offer.
<b>Purchase Price</b>	Equals “natural conditioned weight pounds” multiplied by the applicable “purchase price” (see exhibit).
<b>Less State Advertising</b>	Equals “purchase price” multiplied by current “state advertising rate.” (Call RAC for current rate).
<b>Amount Due</b>	Equals “gross amount” less “state advertising” amount.
<b>Country</b>	Specify the final country of destination for this shipment.
<b>Exporter/Importer</b>	Specify the name of the Exporter/Importer to whom the raisins were shipped.
<b>Intended Shipment Date</b>	Specify the date the shipment was made from the packing plant. *Documentation may be required to verify shipments.
<b>Packer Reference No.</b>	Provide a reference number that has been used to identify this shipment. **Documentation may be required to verify quality and/or volume.

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 0581-0178. The time required to complete this information collection is estimated to average 10 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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