

Your cooperation is needed to make the results of the survey comprehensive. Individual reports are confidential and only summary totals are published. This report is authorized by law, 16 U.S.C. 1854(e).

| | | | | |
|-----------------|------|---|--|--------------------------------------|
| YEAR | 2012 | NOAA FORM 88-13 (REV 10/95) | U.S. DEPARTMENT OF COMMERCE NOAA-NMFS | ARE YOU A: |
| REGION | | FISHERY PRODUCTS REPORT U. S. PROCESSORS, ANNUAL | | PROCESSOR |
| STATE | | | | WHOLESALER (Does Not Process) |
| PLANT NO | | | | COLD STORAGE |
| COUNTY | | | | OTHER |

| | | | |
|----------------------------------|--------------------|--|------------|
| COMPANY PHONE | COMPANY FAX | EMPLOYMENT DATA TO BE COMPLETED BY ALL FIRMS OR PLANTS | |
| _____ MAIL ADDRESS _____ | | NOTE: LIST BY MONTH THE NUMBER OF PERSONS WORKING AT THIS ESTABLISHMENT DURING THE PAYROLL PERIOD THAT INCLUDED THE 12TH OF THE MONTH. | |
| _____ PLANT ADDRESS _____ | | JAN | FEB |
| | | APR | MAY |
| | | JUL | AUG |
| | | OCT | NOV |
| | | REPORT PREPARED BY (Print or type Name) | |
| | | Phone or E-mail | |

| ***** PRODUCTS (1) 1) SPECIFY: FRESH, FROZEN, CURED or INDUSTRIAL | FOR NMFS USE | UNIT | QUANTITY | VALUE FOB PLANT | CHECK |
|--|--------------|------|----------|--------------------|-------|
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| ***** CANNED (1) | FOR NMFS USE | UNIT | OUNCES | PACK | # OF CASES | VALUE FOB PLANT |
|----------------------------|--------------|------|--------|------|------------|--------------------|
| | | CS | | | | |
| | | CS | | | | |
| | | CS | | | | |
| | | CS | | | | |
| | | CS | | | | |

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Form Approved by OMB No. 0648-0018
Expires 8-31-2013

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| YEAR | 2012 | NOAA FORM 88-13 (REV 10/95) | U.S. DEPARTMENT OF COMMERCE NOAA-NMFS | ARE YOU A: | |
| REGION | | | | PROCESSOR | |
| STATE | | | | WHOLESALER (Does Not Process) | |
| PLANT NO | | | | COLD STORAGE | |
| COUNTY | | | | OTHER | |

**FISHERY PRODUCTS REPORT
U. S. PROCESSORS, ANNUAL**

| NEW PRODUCTS (1) 1) SPECIFY: FRESH, FROZEN, CURED or INDUSTRIAL | FOR NMFS USE | UNIT | QUANTITY | VALUE FOB PLANT | CHECK |
|--|--------------|------|----------|--------------------|-------|
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| NEW CANNED (1) | FOR NMFS USE | UNIT | OUNCES | PACK | # OF CASES | VALUE FOB PLANT |
|----------------|--------------|------|--------|------|------------|--------------------|
| | | CS | | | | |
| | | CS | | | | |
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