	DESIGNATED	HANDLER'S	REPORT FOR I	POTATO RES	EARCH AND PI	ROMOTION A	CT
Name:							OMB #0581-0093
Name:   Company:			_	US PO	TATO BOARD		
			—   MAIL -				
1 , (000)			_	-	tate Zip		
			-	Oity, O	Lato 2.1p		
DEDIOD C	OVERED BY THIS R	EDODT:	<del> </del>	INSTRUCTIONS: Mail	original and duplicate copy to	o N.P.P.B. together with ful	Il remittance. Must
PERIOD C	OVERED BITHISK	EPORI.		be mailed within 10 day	ys after the end of each mont	h during which potatoes w	ere handled.
DATE OF I	407.050.07		PLEASE				
DATE OF L	LAST REPORT:		■ COMPLETE				
			•				
FOR ADD	DITIONAL SPACE, Y	OU MAY ATTACH YO	UR OWN SEPARATE	SHEETS. For ques	stions about completi	ng this report call (x	xx) xxx-xxxx
SECTION	1: This section represer	nts all assessable potatoes i	ncluding processed grade.				
		YOUR OWN PRODU		S SOLD:			
<b>l</b>							
		POTATOES PURCH					
Ĺis	st the name and address o	f each grower along with the	corresponding cwt purchas	ed from each grower.			
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l –					<del></del>		
<del>-</del>							
TOTAL /	ALL OWE FROM OF	OTIONI 1 Diagram		ما شدده المفحة مدده الم			
TOTAL A	ALL CWT FROM SEC	CTION 1. Please use t	ne table below to bre	ak down total cwt b	y market segment:		<u> </u>
_	Fresh	Seed	Frozen	Chip-Stock	Dehy	Other	
L							
TOTAL A	AMOUNT OF ASSES	SSMENTS DUE: ( Effec	tive Date, 20xx, assessment	of \$0.xx is due with this re	eport ) x 0.xxx		
						-	
SECTION							
					ERS OR REPACKERS	5:	
	ist each handler's name ar as already been paid by th	nd address along with the co	rresponding cwt. These are	potatoes purchased on w	hich the assessment		
116	as already been paid by in	ie supplier.					
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-					<del></del>		
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l –							
2) (C	THE FIRST HANDLE			D TO OTHER HANG		DUCTED THE ACCE	CCMENTO
		ames and addresses and cor			DLERS WHO HAVE DE	DUCTED THE ASSE	:55MEN 15.
h	as deducted and remitted	the assessments due.	responding cwt. This would	include processed grade	solu to a processor who		
_							
_							
-							
CEDTIEIC	ATION: I cortify that the	ahovo information is true and	d correct to the heet of my ki	nowledge and the attached	d payment represents \$0.xxx	nor cwt on all notatooc list	od in coction 1
					s on the cwt. reported in secti		
others for my	account. I will submit veri	fication of the above upon re	quest.	accoccinona			
TAVID"							
TAX ID#				SIGNATURE			

This report is required by law [7 U.S.C. 2619, 7 CFR 1207.350, 7 CFR 1207.512 and 7 CFR 1207.513(c)]. Failure to report can result in a fine of not less than \$750 or more than \$7,500 for each such violation. Each such violation shall be deemed a separate violation. The making of any false statement or representation on this form, knowing it to be false, is a violation of Title 18, Section 1001 United States Code, which provides for the penalty of a fine of \$10,000 or imprisonment of not more than five years, or both.

TITLE

DATE

**NOTE:** The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 522a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting this information to be supplied on this form is the Potato Research and Promotion Act (7 U.S.C. 2611-2627). Furnishing the requested information is necessary for the administration of this program. Submission of Tax Identification Number (TIN) or Employer Identification Number (EIN) is mandatory, and will be used to determine affiliation or entity identity.

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 0581-0093. The time required to complete this information collection is estimated to average 30 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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POT-FHR (09/07)