	ALLY. Include form number and date on all reproductions.			FORMATION COLLI	ECTION					Page 1 of
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IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT				ANNUAL BURDEN REPORTS					RECORDS	
SECTION OF REGS. (A)	DESCRIPTION (B)	FORM NO. (If "none" so state) (C)	NO. OF RESPON- DENTS (D)	NO. OF RESPONSES PER RESPON- DENT (E)	TOTAL ANNUAL RESPONSES (Col. D x E) (F)	HOURS PER RES- PONSE (G)	TOTAL HOURS (Col. F x G)	NO. OF RECORD KEEPERS (I)	ANNUAL HOURS PER RECORDK EEPER (J)	TOTAL RECORDK EEPING
7 CFR Part 900.700	Certified Organic Producers and Marketers Application for Exemption from Market Promotion Assessments Collected under Federal Marketing Orders	FV-649	55	1.0000	55.00	0.5000	27.50			0.00
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