PRUNE MARKETING COMMITTEE 3840 Rosin Court, Suite 170 Sacramento, CA 95834

PRUNE GROWER NUMBER ASSIGNMENT CORRECTION

HANDLER:			DATE:	
	Name			
DECELUNIC	Address			
RECEIVING STATION:	Name			
	Address			
Please correct grower numbers			Lot Code as indicated below:	
			Signature	
Number		Prune Grower		Lot Identity
Was:	Name: Addres	SS:		
Should Be:	Name: Addres	ss:		
Above request	ed corrections have been i			
Record		Date	Signature	
	iments, weight certificates d	loor		
receipts, contra	cts, etc.			
Incoming Inspe	ections			
DFA Form P-6	issued			
Grower numbe	r assignment on handler's r	eport		
of accounting				

INSTRUCTIONS: The correction needs to be made in your prune grower receiving documents, incoming inspection certificates, handler's report of accounting, or in any other record wherein the old number appears to identify the above producer. *Please return the enclosed copy of this form dated and acknowledged as assurance that this correction has been completed in your prune receiving records and also the incoming inspection records.*

AUTHORITY: This report is required by law (7 U.S.C. 608(d), 7 CFR 993.73).

FAILURE TO REPORT can result in a fine for each such violation and each day during which such violation continues.

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 5 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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