

American Egg Board

OMB No. 0581-0093
 EGG RESEARCH AND PROMOTION ORDER
 COLLECTING HANDLER REPORT

NOTE: PLEASE COMPLETE AND RETURN THIS REPORT # _____ WITHIN 15 DAYS OF THE END OF THE _____ ACCOUNTING PERIOD BEGINNING _____ AND ENDING _____ TO: AMERICAN EGG BOARD

I.D. NUMBER

CASES HANDLED
THIS REPORTING
PERIOD

(1) TOTAL FROM ALL SOURCES

(1)

(2) LESS NONASSESSABLE CASES HANDLED AS FOLLOWS:

A HATCHERY FLOCK	B FLOCKS _____ OR LESS	C IMPORTED	D PREVIOUSLY ASSESSED
	+		+
	+		+
	+		+

(2) **TOTAL A + B + C + D**

(3) **LINE (1-2)**

(3) TOTAL CASES SUBJECT TO ASSESSMENT—MUST EQUAL LINE (5) BELOW

NOTE: PRODUCTION ELIGIBLE FOR EXEMPTION MUST HAVE EXEMPTION CERTIFICATES ON FILE WITH AEB OR THE HANDLER MUST ASSESS IT.

TOTAL ASSESSMENT DUE
LINE (3) X

(4)

PRODUCERS' NAMES, ADDRESSES AND NUMBERS FROM WHOM ASSESSABLE EGGS WERE PURCHASED LIST ANY CHANGES OR ADDITIONS BELOW OR ON REVERSE SIDE	NUMBER OF ASSESSABLE CASES

TOTAL CASES SUBJECT TO ASSESSMENT AS LISTED BY PRODUCER ABOVE → (5)
 THIS TOTAL MUST EQUAL LINE (3)

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS REPORT IS TRUE AND COMPLETE.
 I UNDERSTAND THAT RECORDS FROM WHICH THIS REPORT WAS COMPILED ARE SUBJECT TO AUDIT.

 AUTHORIZED SIGNATURE

 TITLE

 DATE

AEB COPY

INSTRUCTIONS FOR COMPLETING COLLECTION HANDLER REPORT

NOTE: THIS TWO-PART FORM NEEDS NO CARBON PAPER. COMPLETING IT WITH A BALL POINT PEN OR TYPEWRITER WILL AUTOMATICALLY FILL IN YOUR COPY (SECOND PART). AFTER COMPLETION, PULL SHEETS APART AND MAIL TOP COPY TO AEB.

1. Fill in the ending date of the accounting period covered by this report. To assist you in filing consistent reports, the beginning date is supplied based on the type accounting period you chose and should coincide with the beginning of your respective accounting period. If changes are necessary, please let us know. All reports are required to be returned, even if you did not handle any eggs during this period.
2. Verify name, address and zip code. Make any changes necessary. Contact AEB if ownership has changed.
3. Section (1): Fill in total number of cases handled this period from all sources. "Handle" means to grade, carton, process, transport, purchase, or in any way place eggs or cause eggs to be placed in the current of commerce. (Includes eggs of your own production.) (Section 1250.500(h), Rules and Regulations.)
4. Section (2): Fill in number of non-assessable cases handled. Enter by category A, B, C, or D in the boxes provided. Enter the total of categories A, B, C, and D in Box (2).

* Non-assessable categories are:

- A. Hatchery Flocks – Eggs from flocks utilized primarily for the hatching of baby chicks. See restriction.----- →
- B. Flocks _____ or less – Eggs from producers who have owned, in total, less than _____ birds for a 3-consecutive-month period immediately prior to the month in which assessments are due and payable. See restriction.----- →
- C. Imported – Eggs imported from outside U.S. borders (such as Canadian Eggs).
- D. Previously Assessed – Eggs purchased from another handler who has provided a statement with each load indicating the eggs have been assessed under his handler number.

IMPORTANT:

Category A or B type eggs should be assessed in the producer does not have exemption certificates on file with you and AEB effective for this current calendar year.

5. Subtract Box (2) from Box (1) and indicate difference in Box (3). Box (3) must equal Box (5).
6. Multiply Box (3) times case rate printed between line 3 and line 4.
7. **VERY IMPORTANT:** List the number of assessable cases you purchased from each producer during this reporting period in the producer section. List additional producers in the spaces provided on the front or on the back of the first (AEB) copy. Address must be accurate and complete. (Section 1250.529 (a) (1) (v), Rules and Regulations.)
8. Add cases entered for each producer and indicate the total in Box (5). Box (5) should equal Box (3). If it does not, re-check calculations and make corrections so that Box (5) = Box (3). (Don't forget producers on the back form.)
9. Write check for assessment due (Box (4) and mail to AEB lock box address.

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