

**NATIONAL RASPBERRY COUNCIL  
APPLICATION FOR ASSESSMENT CREDITS**

**As stated in Section 1208.52(h) of the Processed Raspberry Promotion,  
Research and Information Order:**

*“Council may provide credits of assessments for those individuals who contribute to local, regional, or State organizations engaged in similar generic research, promotion, and information programs as partial fulfillment of assessment due to the Council subject to approval of the Secretary, for expenditure on generic research, promotion and information programs conducted within the United States.”*

**CERTIFICATION**

(To Be Signed and Dated by Applicant)

**I hereby certify that I have contributed to a local, regional, or State organization engaged in generic research, promotion, and information programs for the period of \_\_\_\_\_. I therefore request a credit for assessments from the National Raspberry Council (Council) for assessments for the year 20XX.**

**Signature \_\_\_\_\_ Date: \_\_\_\_\_**

**Please Print**

**Name of Applicant: \_\_\_\_\_**

**Company Name (if applicable): \_\_\_\_\_**

**Street Address: \_\_\_\_\_**

**City: \_\_\_\_\_ State: \_\_\_\_\_**

**Zip Code: \_\_\_\_\_ Telephone No. \_\_\_\_\_**

**Tax ID# or Business ID#: \_\_\_\_\_**

**Amount contributed to local, regional, or State organization: \$ \_\_\_\_\_**

Please send your completed Application for Assessment Credits to the National Raspberry Council at the following address (with documentation as required):

National Raspberry Council  
Street  
City, State Zip

**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 Commodity Promotion, Research, and Information Act of 1996, Pub. L. 104-127, 110 Stat. 1032 (7 U.S.C. 7411-7425). Furnishing the requested information is necessary for the administration of this program. Submission of Tax Identification Number or Business Identification Number is mandatory, and will be used to determine affiliation or entity identification.

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 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information.

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