

WALNUT CROP HANDLERS' REPORT

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Please make corrections to name, address and ZIP Code, if necessary

The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. By law, every employee and agent has taken an oath and is subject to a jail term, a fine, or both if he or she willfully discloses ANY identifiable information about you or your operation.

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WALNUT HANDLERS' REPORT INSTRUCTIONS

This report is required by Sections 55601.7 and 55601.8 of the California Food and Agriculture Code and must be returned by **September 6, 2017** to the California Department of Food and Agriculture, 650 Capitol Mall, Suite 6-100, P.O. Box 942871, Sacramento, CA 94271-0001. Include all transactions involving the 2016 crop marketing season. Report information in the appropriate section.

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THE QUESTIONNAIRE ON THE BACK OF THIS PAGE

Variety The varieties listed in the table below are to be reported separately in the spaces provided. All other varieties and mixed lots are to be combined and reported as "OTHER."

SECTION I

COLUMN 1 Total Quantity Produced by Handler: For the 2016 crop year, report the total tons produced by you, the handler. **DO NOT** include walnuts purchased from other handlers or other producers.

* If a separate legal entity (owned by the handler) was responsible for walnut production, the handler is not the producer of walnuts. In this case, report tonnage under column (2) - Quantity Purchased from Producers; the separate legal entity is considered the producer. Reporting in this manner, assumes that a market price was established for walnuts produced by the separate legal entity.

SECTION II, FINALIZED PURCHASES

COLUMN 2 Quantity Purchased From Producers: Report the total tons, purchased from producers, for which all pricing is finalized, **DO NOT** include walnuts produced by you, the handler, purchased from other handlers; or tonnage for which pricing is not finalized.

COLUMN 3 Final Weighted Average Price (Including Bonuses and Allowances): In column(3), report the final weighted average price of all walnuts purchased. Report the price separately by variety and **round to the nearest tenth of a cent per pound**. Be sure to include all Bonuses and Allowances. For the prices to be considered finalized, all payments should have been paid to the producers for the 2016 crop by August 31, 2017.

(OVER)

SECTION III. NON FINALIZED PURCHASES

COLUMN 4 Quantity Purchased From Producers: Report the total tons, purchased from producers, for which all pricing is NOT finalized. This covers all tonnage purchased from producers not reported in column (2). DO NOT include walnuts produced by you (the handler) or purchased from other handlers.

COLUMN 5 Estimated Final Weighted Average Price (Including Bonuses and Allowances): Report your "good faith" estimate of the weighted average price for all walnuts purchased in column (4). Report the price separately by variety and round to the nearest tenth of a cent per pound. Be sure to include all Bonuses and Allowances. If not all payments have been sent to the producers for the 2016 crop by August 31, 2017, report these purchases as non-finalized.

WALNUT HANDLER'S REPORT OF IN-SHELL TONS FOR 2016 CROP YEAR

Variety	SECTION I	SECTION II		SECTION III	
	Total Quantity Produced by Handler *	FINALIZED PURCHASES		NON-FINALIZED PURCHASES	
		Quantity Purchased from Producers	Final Weighted Average Price (including bonuses and allowances)	Quantity Purchased from Producers	Estimated Final Weighted Average Price (including bonuses and allowances)
		(1)	(3)	(4)	(5)
Tons	Tons	Cents/Lb.	Tons	Cents/Lb.	
Chandler			_____.		_____.
Franquette			_____.		_____.
Hartley			_____.		_____.
Howard			_____.		_____.
Payne			_____.		_____.
Serr			_____.		_____.
Tulare			_____.		_____.
Vina			_____.		_____.
Other			_____.		_____.
TOTAL			_____.		_____.

Signature of Person Reporting: _____

Please print Name and Title: _____

E-mail: _____ Fax: _____ Cell Phone: _____

Any processor who fails to submit this report, as prescribed, may be subject to a monetary penalty for each day the report is late.

Respondent Name: _____	9911 Phone: _____	9910 MM DD YY Date: ____ - ____ - ____
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This completes the survey. Thank you for your help.

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID											
1-Comp	9901	1-Op/Mgr	9902	1-Mail	9903	9998	9900	9985	9989											
2-R		2-Sp		2-Tel					_____											
3-Inac		3-Acct/Bkpr		3-Face-to-Face					_____											
4-Office Hold		4-Partner		4-CATI					_____											
5-R – Est		9-Oth		5-Web					_____											
6-Inac – Est				6-e-mail					_____											
7-Off Hold – Est				7-Fax					_____											
		8-CAPI	_____																	
		19-Other	_____																	
S/E Name									<table border="1" style="width: 100%; text-align: center;"> <tr> <th colspan="4">Optional Use</th> </tr> <tr> <td>9907</td> <td>9908</td> <td>9906</td> <td>9916</td> </tr> </table>				Optional Use				9907	9908	9906	9916
Optional Use																				
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