	DESIGNATED	HANDLER'S P	REPORT FOR	POTATO RESE	ARCH AND P	ROMOTION AC	CT
Name:							OMB #0581-0093
Company:			_	POTATO	OES USA		
Address:			_   MAIL	=			
			_   """	city, stat			
			-	City, Star	ic zip		
DEDIOD	COVERED BY THIS RI	EDODT:	<del> </del>	INSTRUCTIONS: Mail o	riginal and duplicate copy to	N P P R together with full	remittance Must
FLKIOD	COVERED DI IIIIS KI	LFORT.		be mailed within 10 days	s after the end of each month	h during which potatoes we	re handled.
r PLEASI	F =		_				
L COMPL			◀				
FOR A	DDITIONAL SPACE, Y	OU MAY ATTACH YOU	JR OWN SEPARAT	E SHEETS. For quest	tions about completin	ng this report call (xx	x) xxx-xxxx
	N 1: This section represen				•		•
1.) LIS	ST HERE THE CWT OF	YOUR OWN PRODUC	CTION OF POTATO	ES SOLD:			
<b>'</b>							<del></del>
	ST HERE THE CWT OF						
	List the name and address of	f each grower along with the o	corresponding cwt purcha	ased from each grower.			
-							
-							
-							
-					<del></del>		
-					<del></del>		
-							
-			,		<del></del>		
ΤΩΤΔΙ	ALL CWT FROM SEC	TION 1 Please use th	e table below to be	eak down total cwt hy	market segment:		
10171							
	Fresh	Seed	Frozen	Chip-Stock	Dehy	Other	4
							_
TOTAL	L AMOUNT OF ASSES	SMENTS DUE: ( Effective	ve Date, 20xx, assessme	nt of \$0.xx is due with this rep	oort ) x 0.xxx		
SECTIO							
1.) LI	ST HERE THE CWT O	F POTATOES PURCH	ASED FROM OTHE	R HANDLERS, BROKE	RS OR REPACKERS	:	
	List each handler's name an has already been paid by the	d address along with the cor	esponding cwt. These a	re potatoes purchased on whi	ich the assessment		
	rias aiready been paid by the	е зиррпет.					
					<del></del>		
					<del></del>		
2.) A	S THE FIRST HANDLE	D LIST HEDE DOTAT	OES VOLLHAVE SO	N D TO OTHER HANDI	EDS WHO HAVE DE	DUCTED THE ASSES	SCMENTS.
2.) 🗥		mes and addresses and corre				DUCTED THE ASSET	JOIVILIN I J.
	has deducted and remitted t	he assessments due.	3	9 y			
CERTIFIC	CATION: I certify that the a	above information is true and	correct to the best of my	knowledge and the attached	navment represents \$0.xxx	ner cwt on all notatoes liste	d in section 1
handled du	ring this reporting period for v	which I am required to pay the	assessments as the firs				
others for m	فاسمن فامسمان أبالنين المستنصم مستم	ication of the above upon req	uest.			•	•
	ny account. I will submit veni	ication of the above upon req					
	ny account. I will submit veni	ication of the above apon req					
	ny account. I will submit veril			SIGNATURE			
				SIGNATURE			

This report is required by law [7 U.S.C. 2619, 7 CFR 1207.350, 7 CFR 1207.512 and 7 CFR 1207.513(c)]. Failure to report can result in a fine of not less than \$750 or more than \$7,500 for each such violation. Each such violation shall be deemed a separate violation. The making of any false statement or representation on this form, knowing it to be false, is a violation of Title 18, Section 1001 United States Code, which provides for the penalty of a fine of \$10,000 or imprisonment of not more than five years, or both.

TITLE

**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 from the applicable commodity legislation for research and promotion programs. Furnishing the requested information is necessary for the administration of this program. Submission of Tax Identification Number (TIN) or importer identification number is mandatory and will be used to determine affiliation or entity identity.

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 30 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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