

**AMERICAN PECAN PROMOTION BOARD
 PECAN PROMOTION, RESEARCH, AND INFORMATION ORDER (7 CFR 1223)
 FIRST HANDLER/IMPORTER REPORT FOR 20XX**

PLEASE READ THE INSTRUCTIONS ON THE THIRD PAGE BEFORE COMPLETING REPORT

ASSESSMENTS DUE (monthly/quarterly)

Mail Report and Payment to:
 American Pecan Promotion
 Board (APPB)
 Street
 City, State Zip

PART A: REPORT FOR 20XX SUBMITTED BY:

 (Name of Individual Completing This Report) _____
 (Telephone No., Include Area Code)

 (Name of Business/Company) _____
 (Firm Tax ID# or Employer ID#)

 (Address) _____
 (E-mail Address) *

 (City) (State) _____
 (Zip)

PART B: HANDLER/IMPORTER ASSESSMENT CALCULATION. (Copy form or continue on another sheet if necessary)

LIST BELOW THE NAME AND ADDRESS OF PRODUCERS FOR WHOM YOU RECEIVED/HANDLED PECANS AND THE AMOUNT RECEIVED/HANDLED

NAME & ADDRESS OF PRODUCER	* IDENTIFICATION NUMBER	TOTAL POUNDS In-shell PECANS X \$0.02	TOTAL POUNDS Shelled PECANS X \$0.04	ASSESSMENT/Amount Owed
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				

*GROWER OR FARM ID/CORP/PARTNERSHIP, TAXPAYER ID NO. OR EIN.

TOTAL ASSESSMENT COLLECTED BY HANDLER AND DUE APPB \$ _____

PART C: HANDLER NON-ASSESSED, EXEMPT ORGANIC PECANS OR BELOW 50,000 POUNDS INSHELL (25,000 POUNDS SHELLED) RECEIVED AND NO ASSESSMENT HAS BEEN PAID. (Copy form or continue on another sheet if necessary)

LIST BELOW THE NAME AND ADDRESS OF PRODUCERS FOR WHOM YOU HANDLED ORGANIC PECANS OR BELOW THE THRESHOLD AND THE AMOUNT HANDLED

NAME & ADDRESS OF ORGANIC PRODUCER	* IDENTIFICATION NUMBER	TOTAL POUNDS In-shell	TOTAL POUNDS Shelled	Organic Exemption Certification #
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				
NAME: ADDRESS:				

*GROWER OR FARM ID/CORP/PARTNERSHIP, TAXPAYER ID NO. OR EIN.

CERTIFICATION:

I certify that the above information is true and correct to the best of my knowledge and the attached remittance represents \$0.02 per pound for all in-shell pecans, and \$0.04 per pound for shelled pecans handled during this reporting period on which I was required to pay the assessment. I also certify that I am authorized to sign this report.

NAME (PRINT)

SIGNATURE

TITLE

DATE

ANY FALSE STATEMENT OR MISREPRESENTATION ON THIS FORM MAY RESULT IN A FINE OF NOT MORE THAN \$10,000, OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS, OR BOTH (18 U.S.C. 1001)

INSTRUCTIONS

First handlers are required to file the **First Handler Report** monthly. The American Pecan Promotion Board (APPB) must receive the original of the report, with signature, and full remittance **by 10th day of the month following the month in which it is due**. A late payment charge will be imposed on any handler who fails to remit the total amount due by 10th day following the month that it is due. The individual completing this report will provide their name and contact information in Part A; note producer's name and address, amount received and calculate assessment due in Part B; note organic producer's name and address, amount received and the organic exemption certification number in Part C and sign the certification statement at the bottom of this form. The staff of the American Pecan Promotion Board holds all reports in strict confidence.

First Handler Definition: The definition of First Handler is stated in Section 1223.7 of the Pecan Promotion, Research and Information Order (Part 1223) as follows:

"First Handler means any person who receives, shells, cracks, accumulates, warehouses, roasts, packs, sells, consigns, transports, exports, or ships (except as a common contract carrier of pecans owned by another person), or in any other way puts inshell or shelled pecans in the stream of commerce. The term first handler includes a producer who handles or markets pecans of the producer's own production."

Responsibility for Assessment Collection: As stated in Section 1223.52 (b) of the Pecan Promotion, Research, and Information Order (Part 1223),

"The collection of assessments on pecans produced in the United States, will be the responsibility of the first handler receiving the pecans from producers. In the case of the producer acting as its own first handler, the producer will be required to collect and remit its individual assessments."

Please note that the failure of a handler to collect an assessment from the producer does not release the handler from the responsibility of paying the assessment.

Assessment Exemption: Also note that any producer producing less than 50,000 pounds of inshell pecans (25,000 pounds of shelled pecans) on average for the last four years may apply to the APPB for exemption from assessment.

Organic Assessment Exemption: Also note that any producer producing organic pecans may apply annually to the APPB for exemption from assessment on their organic production.

Submission of Reports and Payments: Reports and payments are to be sent to the Pecan Board at the following address:
APPB, Street, City, STATE Zip

Late Payment Fees

As noted in Section 1223.52, Item D of the Order, *"A late payment charge shall be imposed on any handler who fails to remit to the APPB the total amount for which any such handler is liable on or before the due date established by the APPB. In addition to the late payment charge, an interest charge shall be imposed on the outstanding amount for which the handler is liable"*.

Contact the APPB office at (XXX) XXX-XXXX (phone) or E-mail ____ with any questions concerning this report or APPB assessment requirements.

MAILING ADDRESS: APPB, STREET, CITY, STATE ZIP

TELEPHONE:

EMAIL

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 (TIN) or Employer Identification Number (EIN) 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-new. 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, completing and reviewing the collection of information.

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: 1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; 2) fax: (202) 690-7442; or 3) email: program.intake@usda.gov.

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