

CRANBERRY MARKETING COMMITTEE
 219A Main Street
 Wareham, MA 02571
 Phone: (508) 291-1510
 Fax: (508) 291-1511



DECLARATION OF ALLOTMENTS

Name: _____
 Address: _____
 City, State, Zip code: _____
 Phone (include area code): _____

This letter is being sent for the following reason(s):

- (Name of Handler) will not be acting as a handler of processing fruit this year and during the 20__ crop year you sold processing fruit to (Name of Handler).
- You are a split contract grower, i.e., sold processing fruit to more than one handler during the 20__ crop year.
- You did not declare on your AL-1 form the name of the handler(s) to whom you will be delivering your 20__ crop year processing fruit.

According to our records your allotment for the 20__ crop year is _____ barrels.

1. Indicate below the name of the handler(s) to whom you will deliver all of your 20__ crop year allotment.
2. If you will be splitting your 20__ crop year allotment among more than one handler, provide the name of each handler to whom you will be delivering processed fruit, and the amount of allotment each is to receive. The total amount of processing fruit allotment distributed amongst the handler(s) cannot exceed the allotment amount shown above.

| Handler Name | Allotment Amount (Barrels) |
|--------------|----------------------------|
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This form is to be filed with the Cranberry Marketing Committee (Committee) on or before July 27, 20__. If this form, and the information requested, is not filed with the Committee by July 27, 20__, your allotment will be allocated to the handler to whom you delivered during the 20__ crop year. If there is more than one handler to whom you delivered during the 20__ crop year, the allotment will be split evenly and allocated to each handler accordingly.

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 OMB 0581-0189. The time required to complete this information collection is estimated to average 20 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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