

|                                  |            |                                                                                                                                                            |                                                                                                                                                                                                                                                                             |                   |            |           |         |           |         |
|----------------------------------|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------|-----------|---------|-----------|---------|
| <b>CIAB</b><br><br><b>FORM 3</b> | Crop Year  | <b>SALES/INVENTORY REPORT</b><br><b>Cherry Industry Administrative Board</b><br>P.O. Box 388, DeWitt, MI 48820-0388<br>Tel: 517/669-1070 Fax: 517/669-1260 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Period End</b></td> <td style="width: 50%;"><b>Due</b></td> </tr> <tr> <td>Nov. ____</td> <td>Dec. 10</td> </tr> <tr> <td>Feb. ____</td> <td>Mar. 10</td> </tr> </table> | <b>Period End</b> | <b>Due</b> | Nov. ____ | Dec. 10 | Feb. ____ | Mar. 10 |
| <b>Period End</b>                | <b>Due</b> |                                                                                                                                                            |                                                                                                                                                                                                                                                                             |                   |            |           |         |           |         |
| Nov. ____                        | Dec. 10    |                                                                                                                                                            |                                                                                                                                                                                                                                                                             |                   |            |           |         |           |         |
| Feb. ____                        | Mar. 10    |                                                                                                                                                            |                                                                                                                                                                                                                                                                             |                   |            |           |         |           |         |

Reports are due the 10<sup>th</sup> day of the month following each reporting period.  
Place a check mark in the appropriate month.

Handler: \_\_\_\_\_ Handler ID# \_\_\_\_\_  
 Address, City, State, Zip: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

|                                  | UNITS     | INVENT<br>B.O.Y. | PACKED | UTILIZATION<br>WITHIN INDUSTRY |                  | SALES<br>OUTSIDE OF<br>THE INDUSTRY | ENDING<br>INVENT. |
|----------------------------------|-----------|------------------|--------|--------------------------------|------------------|-------------------------------------|-------------------|
|                                  |           |                  |        | IH TRANS.<br>+ / -             | REPACKS<br>+ / - |                                     |                   |
| <b>FROZEN</b>                    |           |                  |        |                                |                  |                                     |                   |
| 5+1 1.                           | 30#       |                  |        |                                |                  |                                     |                   |
| Variants of Sugar Pack           |           |                  |        |                                |                  |                                     |                   |
| 2.                               |           |                  |        |                                |                  |                                     |                   |
| 3.                               |           |                  |        |                                |                  |                                     |                   |
| IQF 1.                           | 40#       |                  |        |                                |                  |                                     |                   |
| 2.                               |           |                  |        |                                |                  |                                     |                   |
| 3.                               |           |                  |        |                                |                  |                                     |                   |
| <b>DRYING STOCK</b>              |           |                  |        |                                |                  |                                     |                   |
| 5+1 1.                           | 30#       |                  |        |                                |                  |                                     |                   |
| Variants of Sugar Pack           |           |                  |        |                                |                  |                                     |                   |
| 2.                               |           |                  |        |                                |                  |                                     |                   |
| 3.                               |           |                  |        |                                |                  |                                     |                   |
| IQF 1.                           |           |                  |        |                                |                  |                                     |                   |
| 2.                               |           |                  |        |                                |                  |                                     |                   |
| 3.                               | 40#       |                  |        |                                |                  |                                     |                   |
| Other (describe)                 |           |                  |        |                                |                  |                                     |                   |
| <b>OTHER</b>                     |           |                  |        |                                |                  |                                     |                   |
| 1.                               |           |                  |        |                                |                  |                                     |                   |
| 2.                               |           |                  |        |                                |                  |                                     |                   |
| <b>WATERPACK</b>                 | 6 / #10   |                  |        |                                |                  |                                     |                   |
|                                  | 24 / #300 |                  |        |                                |                  |                                     |                   |
| Other (describe)                 |           |                  |        |                                |                  |                                     |                   |
| <b>PIFILL</b>                    | 6 / #10   |                  |        |                                |                  |                                     |                   |
|                                  | 12 / # 2  |                  |        |                                |                  |                                     |                   |
| Other (describe)                 |           |                  |        |                                |                  |                                     |                   |
| <b>DRIED</b>                     | Pounds    |                  |        |                                |                  |                                     |                   |
| <b>PUREE</b>                     |           |                  |        |                                |                  |                                     |                   |
| Concentrated (30 Brix)           |           |                  |        |                                |                  |                                     |                   |
| Single strength                  |           |                  |        |                                |                  |                                     |                   |
| <b>JUICE</b>                     |           |                  |        |                                |                  |                                     |                   |
| Concentrate (68° Brix)           | Gallons   |                  |        |                                |                  |                                     |                   |
| Concentrate (0, 68° Brix)        | Gallons   |                  |        |                                |                  |                                     |                   |
| *Juice Stock                     | Pounds    |                  |        |                                |                  |                                     |                   |
| Juice Stock (0 RPE)              | Pounds    |                  |        |                                |                  |                                     |                   |
| Single Strength                  |           |                  |        |                                |                  |                                     |                   |
| <b>OTHER (Describe and list)</b> |           |                  |        |                                |                  |                                     |                   |
| 1.                               |           |                  |        |                                |                  |                                     |                   |
| 2.                               |           |                  |        |                                |                  |                                     |                   |
| <b>TOTALS</b>                    |           | -                | -      |                                |                  | -                                   | -                 |

Please provide additional information on the reverse side for IH-transfers and/or repacks.

The undersigned hereby certifies to the CIAB and the Secretary of Agriculture, USDA, that this is a true and correct statement of the sales activity of this Handler for the relevant period.

By: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

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 0581-0177. The time required to complete this information collection is estimated to average 23 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.

|                                                                                                                                                                                                                                                                                                                                                                                           |                        |                          |             |                                        |              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------|-------------|----------------------------------------|--------------|
| <b>TRANSFERS OF PRODUCT BETWEEN HANDLERS</b> – Please post any inter-handler transfers of products in which you were involved during the reporting period. If you are the receiving handler in this transaction, your entry should show an increase in the “IH Trans. +/-” for the item purchases. The seller in the transaction should show a decrease in their inventory for this item. |                        |                          |             |                                        |              |
|                                                                                                                                                                                                                                                                                                                                                                                           | <b>Selling Handler</b> | <b>Receiving Handler</b> | <b>Form</b> | <b>Product Bought or sold<br/>Type</b> | <b>Units</b> |
| 1                                                                                                                                                                                                                                                                                                                                                                                         |                        |                          |             |                                        |              |
| 2                                                                                                                                                                                                                                                                                                                                                                                         |                        |                          |             |                                        |              |
| 3                                                                                                                                                                                                                                                                                                                                                                                         |                        |                          |             |                                        |              |
| 4                                                                                                                                                                                                                                                                                                                                                                                         |                        |                          |             |                                        |              |
| 5                                                                                                                                                                                                                                                                                                                                                                                         |                        |                          |             |                                        |              |

|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                   |                    |                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------|--------------------|----------------|
| <b>REPACKS AND RE-MANUFACTURES</b> – Please account for any remanufacturing of cherry products in which you were involved during the reporting period. The products you manufactured should be reflected as an increase to the “Repacks” as a positive figure when compared to your report from the prior period. The products from which you manufactured the new product should be reflected as a negative entry in the “Repacks” column |                       |                   |                    |                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>FROM</b>           |                   | <b>INTO</b>        |                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Source Product</b> | <b># of Units</b> | <b>End Product</b> | <b># Units</b> |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   |                    |                |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   |                    |                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   |                    |                |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   |                    |                |
| 5                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                   |                    |                |

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