

HAZELNUT MARKETING BOARD
 21595-A Dolores Way NE
 Aurora, OR 97002-9738
 Tel: (503) 678-6823; Fax: (503) 678-6825

KERNEL SHIPMENTS

Handler _____

Period _____

Date Of Ship.	Invoice Or Lot No.	Giant	Jumbo	Extra Large	Large	Med.	Small	W/B	Total	
DOMESTIC SHIPMENTS										
Total This Period										
EXPORT SHIPMENTS										<u>Country</u>
Total This Period										

Please return this form marked "No Activity" if no shipments have been made. Individual shipments need not be itemized – monthly totals are acceptable.

This report is required by law (7 U.S.C. 608(d), 7 CFR 982.66 and 7 CFR 982.466). Failure to report can result in a fine for each such violation, and each day during which such violation continues shall be deemed a separate violation.

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 0581-0178. The time required to complete this information collection is estimated to average 15 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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F/H Form 1(e) (Exp. x/xxxx) Destroy previous editions.