WALLA WALLA SWEET ONION MARKETING COMMITTEE

6601 W. Deschutes Ave., Suite C-2 Kennewick, WA 99336

Phone: (509) 585-5460 or Fax: (509) 585-2671

SPECIAL PURPOSE SHIPMENT REPORT

Completion of this form and its submission to the Walla Walla Sweet Onion Marketing Committee (Committee) is **MANDATORY** if you have shipped or received Walla Walla sweet onions out of the production area under a Certificate of Privilege.

Completed by □ SHIPPER □ RECEIVER Company Name	Certificate of Privilege No.	
Contact Name	Phone	Fax
Address		
Received From	Quantity Shipped (50)	lb equiv)
		TOTAL
THE <i>RECEIVER</i> OF SWEET ONIONS HAN RESPONSIBLE FOR THE PAYMENT OF THE RATE OF \$ PER 50 LB. EQUIVALENT PAYABLE TO THE "WALLA WALLA SWE \$	HE COMMITTEE ASSESS C. PLEASE ENCLOSE A	SMENT AT THE CURRENT CHECK OR MONEY ORDER
The enclosed check/money order is payment Walla sweet onions handled under the Certi marketing year.		
Signature	Date	
This form must be completed and returned alon	a with any assassment due	to the Committee within 30 days

This form must be completed and returned, along with any assessment due, to the Committee within 30 days of the date of last shipment.

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 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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Form 4 (Exp. 4/30/2027) Destroy previous editions.