PRUNE MARKETING COMMITTEE 3017 Douglas Blvd, Suite 280 Roseville, CA 95661

PRUNE GROWER NUMBER ASSIGNMENT CORRECTION

HANDLER:				DATE:	
	Name				
	Address				
RECEIVING					
STATION:	Name				
	Address		_		
Please correct grower numbers			Lot Code as indicated below:		
			Signature		
Number		Prune Grower		Lot Identity	
Was:	Name: Address	S:			
Should Be:	Name: Address	3:			
Above request	ed corrections have been m				
Record		Date	Signature		
Receiving docu	ments, weight certificates do	oor			
receipts, contra	cts, etc.				
Incoming Inspe	ections				
DFA Form P-6					
Grower number	r assignment on handler's rep	port of			
accounting					

INSTRUCTIONS: The correction needs to be made in your prune grower receiving documents, incoming inspection certificates, handler's report of accounting, or in any other record wherein the old number appears to identify the above producer. Please return the enclosed copy of this form dated and acknowledged as assurance that this correction has been completed in your prune receiving records and also the incoming inspection records.

AUTHORITY: This report is required by law (7 U.S.C. 608(d), 7 CFR 993.73).

FAILURE TO REPORT can result in a fine for each such violation and each day during which such violation continues.

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 5 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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PMC 8.91 (Exp. 4/30/2027) Destroy previous editions.