Send one signed copy with 24 hours of disposition to: CALIFORNIA DATE ADMINISTRATIVE COMMITTEE P.O. Box 1736 Indio, CA 92202-1736 Tel: (760) 347-4510 Fax: (760) 347-6374

ESTIMATE OF PRODUCTION

Name of Handler:	By:
Address:	Title:
City, State, Zip Code:	Date:

List below the appropriate variety, the pounds of field run dates each of your growers delivered to your packing house during the $20_{-} - 20_{-}$ crop year, and the estimate of the current $20_{-} - 20_{-}$ production. Include your own production if you are a producer/handler.

	Name of Mailing Grower Address	Location		Deglet	Noor	Hal	awy	Khao	lrawy	Zal	nidi	
			of Garden	Acres	Delivered 20 -20	Estimated 20 -20						
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												

The making of a false statement or representation on this form, knowing it to be false, is a violation of title 18, section 1000 of the United States Code, which provides for the penalty of a fine or imprisonment, or both. This report is required by law (7 USC 608(d), 7 CFR 987.51, 987.151). Failure to report can result in a fine for each 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 30 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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