CALIFORNIA OLIVE COMMITTEE INTER-HANDLER SALE OR PURCHASE OF CANNED RIPE OLIVES

(1) TO		a Olive Committee uvial Avenue, Suite CA 93611	152	(3) TRA	NSFER TO:		
(2) FF	ROM:						
(4) RE	PORT OF IN	TERHANDLER S.	ALES OR PUI	RCHASE:	RIPE	GREEN	RIPE
O	live Size	STYLE	CAN SIZE				
S, M	I, L, Ex L, etc.	W, Ptd, Brkn Ptd, etc.	6/10	24/300	X	X	TOTAL
TOT	AL						
REPO	ORT STYLES	S: Whole, Pitted, Bi	oker Pitted. Se	egmented. Slice	ed. Chopped		
(5) CE Califor	RTIFICATION OF THE PROPERTY OF	ON AND SIGNAT ommittee and the Se ate record of inter-h	URE: The und	ersigned, on be	half of the repor	at this report re	
Date	Authorized Official		Receivin	Receiving Handler		Title	
Date	Authorized	l Official	Receivin	Receiving Handler		le	EIN
stateme to be fa	ents or repres	used to verify the p sentations in any ma ation of title 18, sec both.	nner within th	e jurisdiction of	f any agency of	the United Stat	es, knowing it

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 OMB 0581-0178. The time required to complete this information collection is estimated to average 10 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.

INSTRUCTIONS ON COMPLETING FORM COC-30

GENERAL (1): Use this form to report interhandler sales and purchases of canned ripe olives. Delivering handler

shall send a copy (photocopy or carbon) of form COC-30 to the California Olive Committee (COC) at the time the fruit is transferred. The **original** COC-30 shall be sent with the shipment. The receiving handler shall sign the **original** COC-30 upon receipt as verification of the shipment. The **original** Form COC-30 with both signatures shall then be forwarded to the COC.

ITEM (2): Name and address of handler originating sales (seller)

ITEM (3): Name and address of handler receiving sales (purchaser)

ITEM (4): Details of transaction:

(a) Type – Ripe or Green Ripe

(b) Olive size – Small, Medium, Large, etc.(c) Style – Whole, Pitted, Broken Pitted, etc.

(d) Can Size -6/10, 24/300, etc.

ITEM (5): Certification and signatures of both delivering and receiving handlers. Both signatures must be

on the final original Form COC-30 sent to the COC. Please include handler's Employer

Identification Number (EIN).

The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the information to be supplied on this form is the Agricultural Marketing Agreement Act of 1937, Secs. 1-19, 48 Stat. 31, as amended, (7 U.S.C. 601-674). Furnishing the requested information is necessary for the administration of the marketing order program.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.