

SPSC# \_\_\_\_\_

**WASHINGTON CHERRY MARKETING COMMITTEE**

105 S. 18<sup>th</sup> STREET, SUITE 205  
 YAKIMA, WA 98901-2149  
 TELEPHONE: (509) 453-4837  
 FAX: (509) 453-4880

**SPECIAL PURPOSE SHIPMENT REPORT**

To be completed by  SHIPPER or  RECEIVER (please check applicable box):

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_  
 (Street, City, State, and Zip Code)

**Received from:**

<b>Grower/Handler Name (indicate grower or handler)</b>	<b>Sweet Cherry Variety</b>	<b>Pounds</b>

I certify to the Washington Cherry Marketing Committee, the U.S. Department of Agriculture, and the Washington State Department of Agriculture that any shipments made pursuant to this Special Purpose Shipment Certificate will be made in accordance with the current regulations under Marketing Order No. 923, Chapter 16-414 WAC, Cherries, Chapter 16-461 WAC, Inspection Requirements for Fruit and Vegetables, and Chapter 16-463 WAC, Prohibiting the Sale and/or Movement of Infested Cherries. Further, I agree to forward assessments due on these cherries to the Committee office.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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