

MICHIGAN DEPARTMENT OF AGRICULTURE & RURAL DEVELOPMENT AGRICULTURAL MARKETING & BARGAINING ACT PO BOX 30017, LANSING, MICHIGAN 48909-7517 P: 517-284-5642 F: 517-763-0500 E: haarerj@michigan.gov

The information requested herein is required by Act 344, PA 1972, as amended.

GROWER DATA REPORT FORM

(FOR USE WITH GROWER LIST – PLEASE PRINT CLEARLY)

FIRST HANDLER	BUSINESS NAME	CROP	YEAR DA	ATE		
FIRST HANDLER BUSINESS NAME		Ortor		(1)		
ADDRESS (INCLUDE STREET NUMBER & NAME)		COMM	COMMODITY UNIT OF ME			
		_	□APPLE			
			PARAGUS			
CITY, STATE, ZIP		PHONE	F <i>F</i>	λX		
CONTACT DEDCC	NI NIANAE TITLE		(Confidential In	tornal Llac Only)		
CONTACT PERSO	JN NAME, TITLE	EIVIAIL	EMAIL (Confidential, Internal Use Only)			
Check the staten	nent(s) that apply for the crop year b	eing reported, if	applicable:			
	s no purchases to report.	0 1 ,				
<u>—</u>						
☐ Our firm has	s not finished purchasing this year's cro	p. (Submit prelimi	nary report)			
Our firm doe	es not anticipate purchasing in the future	e but will notify yo	ur office if our pl	lans change.		
I hereby certify tha	t to the best of my knowledge, the infor	mation supplied h	erewith is a com	nlete report of all		
	ses as of the date noted above.	mation cappilod in		ploto report of all		
X						
SIGNATURE OF RESPONSIBLE PARTY		DATE				
PHONE NUMB	ER (if different from above)	FMAIL ADDRES	S (if different from	m above)		
THORE NOME	er (ii amorem nom above)	EMAIL ADDRESS (if different from above)				
AMBA GROWER ID	REGISTERED GROWER NAME: If	PROCESSING	GROSS VALUE			
NUMBER OR "FH"	Grower ID Number is NOT given,	VOLUME FOR THIS GROWER	BEFORE DEDUCTIONS	ONLY: Mark box if		
(First Handler) when appropriate	<u>COMPLETE</u> name, address, and phone number is required	I HIS GROWER	DEDUCTIONS	non-cooperative purchase		
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AMBA GROWER DATA REPORT FORM

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FIRST HANDLER	BUSINESS NAME		CO	MMODITY APPLE ASPARAGUS	CROP YEAR
AMBA GROWER ID NUMBER OR "FH" (First Handler) when appropriate	REGISTERED GROWER NAME: If Grower ID Number is NOT given, COMPLETE name, address, and phone number is required	PROCESSIN VOLUME FO THIS GROW	R	GROSS VALUE BEFORE DEDUCTIONS	COOPERATIVES ONLY: Mark box if non-cooperative purchase