

California Apple Commission

~ ASSESSMENT FORM ~

Company: _____ Reporting Month: _____

Telephone: _____ **Note: (This is your only invoice. Please make copies of the Assessment Form for future use)**

Please report all apples shipped. Failure to submit or pay assessments by the fifteenth day of the month after assessments are due and payable will result in a 10% penalty on the principal amount due and owing. In addition to the 10% penalty, interest at the rate of 1.5% per month will accrue on the unpaid principal assessment balance.

Carton Size	Variety	Quantity Shipped	X	Assessment	Total
40 LB Standard	Granny Smith		X	.175	
Heavy Pack greater than 44 LB	Granny Smith		X	.1925	
Triwall bin loose	Granny Smith		X	2.625	
Triwall bin bags	Granny Smith		X	2.275	
*Other	Granny Smith		X	.175	
Euro Pack	Granny Smith		X	.118	
Metric	Granny Smith		X		
Bags	Granny Smith		X		
40 LB Standard	Fuji		X	.175	
Heavy Pack greater than 44 LB	Fuji		X	.1925	
Triwall bin loose	Fuji		X	2.625	
Triwall bin bags	Fuji		X	2.275	
*Other	Fuji		X	.175	
Euro Pack	Fuji		X	.118	
Metric	Fuji		X		
Bags	Fuji		X		
40 LB Standard	Gala		X	.175	
Heavy Pack greater than 44 LB	Gala		X	.1925	
Triwall bin loose	Gala		X	2.625	
Triwall bin bags	Gala		X	2.275	
*Other	Gala		X	.175	
Euro Pack	Gala		X	.118	
Metric	Gala		X		
Bags	Gala		X		
40 LB Standard	Red Delicious		X	.175	
Heavy Pack greater than 44 LB	Red Delicious		X	.1925	
Triwall bin loose	Red Delicious		X	2.625	
Triwall bin bags	Red Delicious		X	2.275	
*Other	Red Delicious		X	.175	
Euro Pack	Red Delicious		X	.118	
Metric	Red Delicious		X		
Bags	Red Delicious		X		

**ASSESSMENT FORM
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Carton Size	Variety	Quantity Shipped	X	Assessment	Total
40 LB Standard	Golden Delicious		X	.175	
Heavy Pack greater than 44 LB	Golden Delicious		X	.1925	
Triwall bin loose	Golden Delicious		X	2.625	
Triwall bin bags	Golden Delicious		X	2.275	
*Other	Golden Delicious		X	.175	
Euro Pack	Golden Delicious		X	.118	
Metric	Golden Delicious		X		
Bags	Golden Delicious		X		
40 LB Standard	Cripps Pink		X	.175	
Heavy Pack greater than 44 LB	Cripps Pink		X	.1925	
Triwall bin loose	CrippsPink		X	2.625	
Triwall bin bags	CrippsPink		X	2.275	
*Other	Cripps Pink		X	.175	
Euro Pack	Cripps Pink		X	.118	
Metric	Cripps Pink		X		
Bags	Cripps Pink		X		
40 LB Standard	Braeburn		X	.175	
Heavy Pack greater than 44 LB	Braeburn		X	.1925	
Triwall bin loose	Braeburn		X	2.625	
Triwall bin bags	Braeburn		X	2.275	
*Other	Braeburn		X	.175	
Euro Pack	Braeburn		X	.118	
Metric	Braeburn		X		
Bags	Braeburn		X		
40 LB Standard	Gravenstein		X	.175	
Heavy Pack greater than 44 LB	Gravenstein		X	.1925	
Triwall bin loose	Gravenstein		X	2.625	
Triwall bin bags	Gravenstein		X	2.275	
*Other	Gravenstein		X	.175	
Euro Pack	Gravenstein		X	.118	
Metric	Gravenstein		X		
Bags	Gravenstein		X		
40 LB Standard	Jonathan		X	.175	
Heavy Pack greater than 44 LB	Jonathan		X	.1925	
Triwall bin loose	Jonathan		X	2.625	
Triwall bin bags	Jonathan		X	2.275	
*Other	Jonathan		X	.175	
Euro Pack	Jonathan		X	.118	
Metric	Jonathan		X		
Bags	Jonathan		X		

**ASSESSMENT FORM
PAGE THREE**

Carton Size	Variety	Quantity Shipped	X	Assessment	Total
40 LB Standard	Sun Downer		X	.175	
Heavy Pack greater than 44 LB	Sun Downer		X	.1925	
Triwall bin loose	Sun Downer		X	2.625	
Triwall bin bags	Sun Downer		X	2.275	
*Other	Sun Downer		X	.175	
Metric	Sun Downer		X		
Bags	Sun Downer		X		
40 LB Standard	Sommerfeld		X	.175	
Heavy Pack greater than 44 LB	Sommerfeld		X	.1925	
Triwall bin loose	Sommerfeld		X	2.625	
Triwall bin bags	Sommerfeld		X	2.275	
*Other	Sommerfeld		X	.175	
Metric	Sommerfeld		X		
Bags	Sommerfeld		X		
40 LB Standard	Ginger Gold		X	.175	
Heavy Pack greater than 44 LB	Ginger Gold		X	.1925	
Triwall bin loose	Ginger Gold		X	2.625	
Triwall bin bags	Ginger Gold		X	2.275	
*Other	Ginger Gold		X	.175	
Metric	Ginger Gold		X		
Bags	Ginger Gold		X		
40 LB Standard	Other		X	.175	
Heavy Pack greater than 44 LB	Other		X	.1925	
Triwall bin loose	Other		X	2.625	
Triwall bin bags	Other		X	2.275	
*Other	Other		X	.175	
Euro Pack	Other		X	.118	
Metric	Other		X		
Bags	Other		X		
				Total Due	\$

I hereby certify to the best of my knowledge that this report is true and complete. I understand that all records from which this report is compiled are subject to audit by the CAC and the California Department of Food & Agriculture and must be preserved for three years.

Signature: _____ Date: _____

Note: Monthly Destination Reports must be returned with this invoice.