

THIS REPORT IS TO BE FILED EVEN IF ZERO CATTLE ARE SOLD

CALIFORNIA BEEF COUNCIL

P.O. Box 2278
Rocklin, CA 95677
916-925-2333

MONTHLY CALF NURSERY ASSESSMENT REPORT

IMPORTANT

Make remittance payable to: California Beef Council and return with **ONE** completed copy of this report in the enclosed envelope, **DO NOT SEND COIN OR CURRENCY**

The California Beef Council Law requires an assessment fee of \$1.00 per head on all calves purchased by a calf nursery in California with the following exceptions: Those calves purchased by the calf nursery from a sales market and calves that qualify for an exemption.

Month and _____

| | | NUMBER OF HEAD | | |
|----|---|----------------|---------------|------------------|
| 1. | Total calves purchased for feeding. | | | |
| 2. | Total calves purchased from sales markets. | | | |
| 3. | Total calves purchased from out-of-state for which the assessment fee was paid in the state of origin. (Please fill in the reverse side of this form.) | | | |
| 4. | Total exempt calves. (Calves that are accompanied by a Certification of Non-Producer Status.) | Certificate # | RATE PER HEAD | BEEF COUNCIL FEE |
| 5. | Total calves purchased from producers. | # of Head | \$1.00 | \$ |
| 6. | Total calves purchased from out-of-state for which the assessment was <u>not</u> paid in the state of origin. (Please fill in the reverse side of this form.) | # of Head | \$1.00 | \$ |
| 7. | TOTAL ASSESSMENT DUE AND REMITTED: | | \$ | |

Line 1 less 2 - 4.

Total lines 5 and 6

I hereby certify that to the best of my knowledge and belief, this report is true and complete. I understand that records from which this report was compiled are subject to audit by the Compliance Coordinator for the California Beef Council.

Today's Date _____

Signature of Person Authorized to Certify Report

Phone (____) _____

Please Print Name and Title

Email address _____

RECORD OF CATTLE & CALVES RECEIVED FROM OUT-OF-STATE

Out-of-state sellers claiming that the fee was paid in the state of origin shall provide documentation that the fee was paid in the state of origin. **Note: If cattle or calves have been in California for 30 days or more, they are California cattle or calves, and not from out-of-state.**

| DATE | STATE OF ORIGIN | NUMBER OF CATTLE & CALVES RECEIVED | FEE PAID IN STATE OF ORIGIN | FEE PAID IN CALIFORNIA |
|---------------|-----------------|------------------------------------|-----------------------------|------------------------|
| | | | \$ | \$ |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTALS | | | \$ | \$ |

GENERAL INSTRUCTIONS

Fees are due and payable on or before the 15th day of the month next succeeding the month in which the sale or receipt occurs.

Unless the fees are paid in the manner provided for above, they are delinquent and the sales market shall be subject to the penalties provided for in the Law. The postmark on the envelope containing the remittance shall be considered the date of payment, regardless of the date entered on the fee report form or the remittance.

Please return **ONE** completed copy of the assessment form and your remittance.

If you have any questions, please contact the California Beef Council at (916) 925-2333.