



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Plant Industry

**2012 BOLL WEEVIL ERADICATION PROGRAM
COTTON ACREAGE REPORTING FORM**

Section 593.105, F.S. / Rule 5B-2.009, F.A.C.
1911 S.W. 34th St./P. O. Box 147100, Gainesville, FL 32614-7100/(352) 372-3505/Fax (352) 955-2301

Producer: _____
Address: _____ Email Address: _____
City: _____ State: _____ Zip: _____
County Where Cotton Is Grown: _____ Telephone: () _____

Farm No.	Tract No.	Field No.	Photo No.	Intended Acres	Actual Acres Certified	Remarks

I certify to the best of my knowledge and belief that the intended acres and the actual acres certified totals of cotton listed herein as true and correct, and that I am subject to the regulations and penalties as set forth in Chapter 593, F.S. and Florida Administrative Code Rule Chapter 5B-52.

Producer's Signature _____

Date: _____ Date: _____
Intended Acres Reported Actual Acres Certified

FOR FSA USE ONLY

Federal ID No. _____

If the intended acres are filed by the April 30th deadline, and the actual acres are certified by the June 30th deadline, and the assessment is paid by July 31st, the per acre assessment shall be \$1.00. Otherwise, the per acre assessment shall be \$5.00.

_____	x	\$1.00	= \$	_____
Certified Acres		OR		Assessment Due
_____	x	\$5.00	= \$	_____
Certified Acres				Assessment Due
Certified: Date: _____				
FSA Employee Initial _____				

MAIL OR FAX A COPY OF THE COTTON ACREAGE REPORTING FORM WITH THE INTENDED ACRES INFORMATION TO THE DIVISION OF PLANT INDUSTRY. MAIL COMPLETED COTTON ACREAGE REPORTING FORM WITH CERTIFIED ACTUAL ACRES ALONG WITH PAYMENT TO DIVISION OF PLANT INDUSTRY (DPI), P.O. BOX 147100, GAINESVILLE, FLORIDA 32614-7100. FAX: (352) 955-2301.

