



**LAKE COUNTY
WINEGRAPE COMMISSION**

**ASSESSMENT REPORT
2012 HARVEST**

Peter Molnar – Chairman
Bill Brunetti
Buz Derenik
Randy Krag
Jeff Lyon
Jonathan Walters
David Weiss
Broc Zoller

Shannon Gunier, President

Please note: Make checks payable to the Lake County Winegrape Commission and return with a copy of this report to:

**District 2 Lake County Winegrape Commission
Attn: Susan Peters
P.O. Box 877, Lakeport, CA 95453**

Vintner/Purchaser: _____ Contact Phone: _____

Address: _____

City/State: _____ Zip Code: _____ E-Mail _____

Has purchased Lake County Winegrapes from:

Grower: _____ Contact Phone: _____

Address: _____

City/State: _____ Zip Code: _____

Grower Co-op (if any): _____

From Vineyard:	Variety:	Tonnage:	Dollar Value:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL DOLLAR VALUE

Total Dollar Value \$ _____ x 2012 Assessment Rate 1% = Total Assessment \$ _____

Remitted with this report \$ _____ Remitted previously \$ _____ Balance Due \$ _____

_____ **I did not purchase any Lake County winegrapes this year.**

PLEASE NOTE: Sections 74956 and 74957 of the California Food and Agricultural Code provide that payment must be made to the Commission within 30 days after the date the buyer deducts the assessment from the payment to the grower. Payments that are not made in that time frame are subject to a penalty of 10% with interest at the rate of 1.5% per month. Section 74956 also specifies that "vintners responsible for deducting the assessment may deduct and retain an amount not in excess of that reasonably necessary to cover the actual costs of services provided by the vintner." The Lake County Winegrape Commission members have specified that winegrape purchasers may withhold up to 1% of the assessment amount to cover the costs of their services.

Date: _____ Signature of Vintner or Authorized rep. _____

Telephone: _____ Please Print Name and Title: _____