



Republic of the Philippines
Department of Agriculture

SUGAR REGULATORY ADMINISTRATION

Sugar Center Bldg., North Avenue, Diliman, Quezon City, Philippines 1101
TIN 000-784-336
Website: <http://www.sra.gov.ph>
Email Address: srahead@sra.gov.ph
Tel No. (632) 8929-3633, (632) 3455-2135, (632) 3455-3376



MEMO-REG-LMD-2023-Jun-035

29 June 2023

CIRCULAR LETTER NO. 31
Series of 2022-2023

TO : SUGAR MILL COMPANIES
SUGAR PLANTERS' ASSOCIATIONS/COOPERATIVES

SUBJECT : SUGAR PRODUCTION FOR
CY 2022-2023 BY AFFILIATION

In view of the need to determine the respective pro-rata shares of the different national producers in the CY 2022-2023 sugar production, all concerned sugar mill companies and planters' associations/cooperatives are hereby directed to accomplish and submit to SRA the attached forms (SRA Form-1 for the mills and SRA Form-2 for the planters' associations/cooperatives).

For the Mills:

SRA Form-1 should be duly certified by the Corporate Secretary of the mill company attesting to the following information:

1. Affiliation of the mill company with the following national millers' organization:
 - a) Philippine Sugar Millers Association, Inc. (PSMA)
 - b) Philippine Independent Millers Association, Inc. (PIMA)
2. Total manufactured/production for CY 2022-2023 of the mill company distributed into mill shares and individual shares of the planters' associations/cooperatives, indicating therein both volume and percentages.

If there are unaffiliated planters, their total shares and percentage should also be indicated.

3. Affiliation of the planters' association/cooperative with any of the national planter's organizations:
 - a) Confederation of Sugarcane Producers Association, Inc. (CONFED)



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- b) National Federation of Sugarcane Planters, Inc. (NFSP)
- c) United Planters Federation of the Phil., Inc. (UNIFED)
- d) Panay Federation of Sugarcane Planters (PANAYFED)
- e) Luzon Federation of Sugarcane Growers Assn., Inc. (LUZONFED)

For Planters' Associations/Cooperatives:

SRA Form-2 should likewise be duly certified by the Corporate Secretary of the planters' association/cooperative attesting to its official affiliation with any of the aforesaid national planters' organizations.

If the association/cooperative is affiliated with more than one national aggrupations, such a fact should be stated and the proportion of membership with each national organization in percentages (in the absence of which, the membership shall be deemed equally distributed).

The accomplished forms (SRA Form-1 for mills and SRA Form-2 for planters' association) shall be submitted immediately, right after the milling operation of CY 2022-2023, to the Regulation Department (RD), SRA, Diliman, Quezon City, through the Mill District Regulation Officer assigned thereat.

This Circular Letter shall take effect immediately.


PABLO LUIS S. AZCONA
Administrator


Encl: as stated

RAW SUGAR PRODUCTION
CROP YEAR 2022 - 2023
BY PRODUCER / BY AFFILIATION

Mill Company : _____

Date : _____

Total Manufactured: _____

As of : _____

PRODUCTION
QTY (MT) % OF TOTAL

MILL SHARE _____ PSMA [] PIMA []

NAME OF PLANTERS' ASSOCIATION	PLANTER'S SHARE		AFFILIATION
	QTY (MT)	% OF TOTAL	
1.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
2.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
3.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
4.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
5.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
TOTAL PLANTERS' SHARE	=====	=====	

I hereby certify that the foregoing information are correct and true to the best of my knowledge.

Corporate Secretary
(Signature Over Printed Name)

Date

CERTIFICATION AS TO AFFILIATION WITH
THE NATIONAL PLANTERS' ORGANIZATION

TO WHOM IT MAY CONCERN:

This is to certify that _____

(Planters' Association/Cooperative)

of _____

(Address of Planters' Association/Cooperative)

is a Bona Fide

member/affiliated with:

		% AFFILIATION (100% if one (1) Affiliation)
1) CONFED	[]	
2) NFSP	[]	
3) UNIFED	[]	
4) PANAYFED	[]	
5) LUZONFED	[]	
6) Others (specify) _____		

as of this date hereof.

This certification is being issued in compliance with SRA Circular Letter No. _____, Series of 2022-2023, dated _____.

Corporate Secretary
(Signature Over Printed Name)

Date

CERTIFICATION AS TO AFFILIATION WITH
THE NATIONAL PLANTERS' ORGANIZATION

TO WHOM IT MAY CONCERN:

This is to certify that _____
(Planters' Association/Cooperative)

of _____ is a Bona Fide
(Address of Planters' Association/Cooperative)

member/affiliated with:

		% AFFILIATION (100% if one (1) Affiliation)
1) CONFED	[]	
2) NFSP	[]	
3) UNIFED	[]	
4) PANAYFED	[]	
5) LUZONFED	[]	
6) Others (specify) _____		

as of this date hereof.

This certification is being issued in compliance with SRA Circular Letter No. _____, Series of 2022-2023, dated _____.

Corporate Secretary
(Signature Over Printed Name)

RAW SUGAR PRODUCTION
CROP YEAR 2022 - 2023
BY PRODUCER / BY AFFILIATION

Mill Company : _____

Date : _____

Total Manufactured: _____

As of : _____

MILL SHARE	PRODUCTION		AFFILIATION
	QTY (MT)	% OF TOTAL	
			PSMA [] PIMA []
NAME OF PLANTERS' ASSOCIATION	PLANTER'S SHARE		AFFILIATION
	QTY (MT)	% OF TOTAL	
1.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
2.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
3.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
4.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
5.	_____	_____	<input type="checkbox"/> CONFED <input type="checkbox"/> NFSP <input type="checkbox"/> UNIFED <input type="checkbox"/> PANAYFED <input type="checkbox"/> LUZONFED <input type="checkbox"/> Multiple (Specify) _____ <input type="checkbox"/> Others (Specify) _____
TOTAL PLANTERS' SHARE	=====	=====	

I hereby certify that the foregoing information are correct and true to the best of my knowledge.

Corporate Secretary
(Signature Over Printed Name)