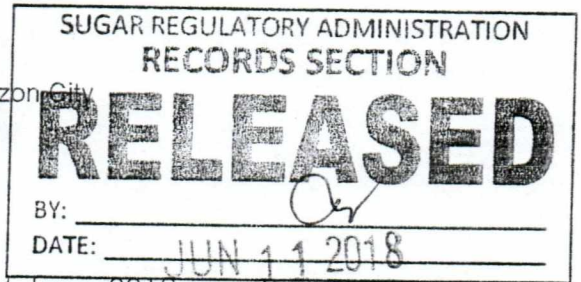




Republic of the Philippines  
Department of Agriculture  
**SUGAR REGULATORY ADMINISTRATION**  
Sugar Center Bldg., North Ave., Diliman, Quezon City  
Philippines 1101  
TIN 000-784-336

MEMO-REG-LMD-2018-Jun-004



04 June 2018

**CIRCULAR LETTER NO. 23**  
Series of 2017-2018

**TO : SUGAR MILL COMPANIES  
SUGAR PLANTERS' ASSOCIATIONS/COOPERATIVES**

**SUBJECT : SUGAR PRODUCTION FOR  
CY 2017-2018 BY AFFILIATION**

In view of the need to determine the respective pro-rata shares of the different national producers in the CY 2017-2018 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 production for CY 2017-2018 of the mill company distributed into mill share 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 planters organizations:
  - a) Confederation of Sugarcane Producers Association, Inc. (CONFED)
  - 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 2017-2018, to the Regulation Department (RD), SRA, Diliman, Quezon City, through the Mill District Regulation Officer assigned to the mill concerned.

This Circular Letter shall take effect immediately.

  
**HERMENEGILDO R. SERAFICA**  
Administrator

Encl: as stated

**RAW SUGAR PRODUCTION  
CROP YEAR 2017 - 2018  
BY PRODUCER / BY AFFILIATION**

Mill Company : \_\_\_\_\_

Date : \_\_\_\_\_

Total Production : \_\_\_\_\_

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) _____
<b>TOTAL PLANTERS' SHARE</b>	=====	=====	

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 \_\_\_\_\_ 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 2017-2018, dated \_\_\_\_\_.

\_\_\_\_\_  
Corporate Secretary  
(Signature Over Printed Name)



RAW SUGAR PRODUCTION  
CROP YEAR 2017 - 2018  
BY PRODUCER / BY AFFILIATION

Mill Company : \_\_\_\_\_

Date : \_\_\_\_\_

Total Production : \_\_\_\_\_

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) _____
<b>TOTAL PLANTERS' SHARE</b>	=====	=====	

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 \_\_\_\_\_ 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 2017-2018, dated \_\_\_\_\_.

\_\_\_\_\_  
Corporate Secretary  
(Signature Over Printed Name)