January 18, 2005
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In This Issue
Butte and Glenn Counties
Walnut Day and
Almond Institute

Bill Krueger
Farm Advisor

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To simplify information, trade
names of products have been
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Butte and Glenn Counties
Walnut Day/Almond Institute

Tuesday, February 1, 2005
Masonic Family Center
1110 W. East Ave., Chico, California

PROGRAM
7:30-8:30 Registration Table Open-----Pick up lunch tickets
(No meeting charge, buffet lunch - $11.00 per person)

Moderator: Joe Connell

8:30 Progress Using the Pressure Bomb in Walnut
Allan Fulton, UC Farm Advisor, Tehama Co.
Walnut Blight: When to Apply the First Spray
Bill Olson, UC Farm Advisor Emeritus, Butte Co.

9:30 Break - Sponsor: Almond Board of California
Walnut Breeding Program Update
Dr. Gail McGranahan, Pomologist, UC Davis
New Research on Pistillate Flower Abortion
Dr. Vito Polito, Pomologist, UC Davis
Agricultural Commissioner's Laws and Regulations Update
Richard Price, Butte County Ag. Commissioner
The Almond Growers Role...GAPs and Food Safety
Richard Waycott, President and CEO, Almond Board of
California
Colleen Aguiar, Manager, Industry Relations

12:00 Lunch ---- pre-registration required

Special Thanks to:
DuPont Crop Protection and the Almond Board of California for financial sponsorship of this meeting.
Moderator: Bill Krueger

12:45  Comparison of Potassium Sources, Rates, and Application Effectiveness  
  Dr. Roland Meyer, Soil Specialist, UC Davis  
  Nitrogen Management in Almonds  
  Bill Krueger, UC Farm Advisor, Glenn County  
  Almond Union Mild Etch Disorder - Final Results  
  & Almond Leaf Scorch Update  
  Joe Connell, UC Farm Advisor, Butte County

  2 hours of PCA credit requested.

2:45  Adjourn

Registration Form  
Walnut Day/Almond Institute Luncheon

Registration must be received by Friday, January 28, 2005

To enable us to provide a lunch, pre-paid reservations are required.

Please make ____ reservation(s) for the buffet lunch. Cost: $11.00/person. A check for $____ payable to UC Regents is enclosed.

Mail to: UC Cooperative Extension, 2279-B Del Oro Ave., Oroville, CA 95965

Name: ___________________________________________________________________________________
Address: _________________________________________________________________________________
City/State/Zip: ____________________________________________________________________________
Phone: __________________________________________________________________________________
If your reservation is for more than one person, please list names of others covered by your check:  
_________________________________________________________________________________________