

STATE OF CALIFORNIA—OFFICE OF ADMINISTRATIVE LAW  
**NOTICE PUBLICATION REGULATIONS SUBMISSION** (See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER <b>Z-2018-0626-11</b>	REGULATORY ACTION NUMBER <b>2020-0228-0351</b>	EMERGENCY NUMBER
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**ENDORSED - FILED**  
 in the office of the Secretary of State  
 of the State of California

**APR 13 2020**  
 1:37 P.M.

For use by Office of Administrative Law (OAL) only

2020 FEB 28 P 3:48

OFFICE OF ADMINISTRATIVE LAW

NOTICE	REGULATIONS
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AGENCY WITH RULEMAKING AUTHORITY Department of Food & Agriculture	AGENCY FILE NUMBER (If Any) 2019-0708-01SR
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**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE Fertilizing Materials Violations Matrix	TITLE(S) 3	FIRST SECTION AFFECTED 2300	2. REQUESTED PUBLICATION DATE July 6, 2018
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Nick Young	TELEPHONE NUMBER (909) 266-7994	FAX NUMBER (Optional)
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER 2018, 27-2	PUBLICATION DATE 7/6/2018	

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) Fertilizing Materials Violations Matrix	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) 2019-0708-01SR; 2019-0514-025 per agency request
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT
	AMEND 2300.1, 2303, 2315, 2322, 2322.1, 2322.2, 2322.3, 2326.1 See attachment per agency request
TITLE(S) 3	REPEAL

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input checked="" type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)  
 November 21 - December 5, 2018; June 18 - July 3, 2019; December 6 - December 21, 2019

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify) _____
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify) _____		

7. CONTACT PERSON Nick Young	TELEPHONE NUMBER (909) 266-7994	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) Nick.Young@cdfa.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Kevin Masuhara</i>	DATE 2/12/2020
TYPED NAME AND TITLE OF SIGNATORY KEVIN MASUHARA, DEPUTY SECRETARY	

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**ENDORSED APPROVED**

**APR 13 2020**

Office of Administrative Law

## **ATTACHMENT FOR FORM 400**

### Section B2 Amendment:

Amend sections 2300.1, 2303, 2304, 2308, 2315, 2318, 2322, 2322.1, 2322.2, 2322.3, and 2323