16632

# SALES REPORT OF RESTRICTED USE AND STATE LIMITED PESTICIDES

## CALENDAR YEAR 2003

### 1) Dealership

Dealer Name

Address

Phone (Format 000-000-0000)

Ext

City

State

Zip Code

Zip Ext

### 2) Company Headquarters Address (if different from above)

Name of the Company or Corporation

Address

Suite

City

State

Zip Code

Zip Ext

### 3) Licensed Personel Included In Report

Personnel Name

Dealer License No

### 4) Report Prepared by

Preparer

Date (Format mm-dd-yyyy)

Signature

Phone (Format 000-000-0000)

5 Pesticide Brand Name And Active Ingredient

6 EPA Reg No

7 Customer Name (Last Name, First Name)

8 Certification

9 Total Purchased

Amount

Unit

Page Total

10 Dealership

Dealer Name

City

44337