

WYOMING CERTIFIED SEED TAG REQUEST

Send Original To: *Wyoming Seed Certification*
P.O. Box 983; Powell, WY 82435
307-754-9815

Date of Request _____

Person/Company Requesting Tags _____

Grower/Labeler _____

Kind _____

Variety _____

Cert. Lot No. _____

Other Lot No. _____

of 50 lbs. tags requested _____ F R C SI T S

of 2,000 tote tags requested _____ F R C SI T S

of _____ tags _____ lbs./bag F R C SI T S

Ship To: _____

Bill To: _____

Conditioner Tags _____

Analysis Tags _____

Analysis with Conditioner # _____

TEST INFORMATION

Purity ♦ Test No. _____

Date _____

Germ ♦ Test No. _____

Date _____

ACTUAL

_____ % Pure Seed
_____ % Weed Seed
_____ % Other Crop Seed
_____ % Inert
_____ % Germination
Hard/Dormant
_____ % Seed
_____ % Total

PRINTED AS

_____ % Pure Seed
_____ % Weed Seed
_____ % Other Crop Seed
_____ % Inert
_____ % Germination
Hard/Dormant
_____ % Seed
_____ % Total

Seeds Per Lbs. _____ Treat _____

Date Printed/Counted/Emailed _____

Initials _____