

## State of Washington Potato Committee P.O. Box 1815, Moses Lake, Washington 98837 Phone (509) 765-8845 / FAX (509) 765-4853

	SPECIAL PURPOSE SHIPMENT	REPORT		
	SPECIAL PURPOSE CERT	ΓΙFICATE NO		_
SHIPPED TO:				
ADDRESS:	CITY: _		STATE:	ZIP:
VARIETY	CARRIER	IDENTIFICATION - OWNER LICENSES		
PURPOSE: (check one)	SALAD FREEZING		ING CHIPS CHARITY SEED	DEHYDRATION
	EXPERIMENTATION		JEED	
HUNDREDWEIGHT SHIPPED		HUNDREDWEIGHT RECEIVED		
DATE SHIPPED		DATE RECEIVED		
Is the Receiver the Process If not, who?	or? If not, who?	Are yo	ou the Processor?	
Name		Name		
Address		Address		
If purpose is other than stat	ed by Shipper, specify:			
Agriculture that these potat current Marketing Order F stated. I realize that the m be false, is a violation of ti	to the Committee and the Secretary of toes are being shipped in accordance with Regulations for use only for the purpose aking of a false statement, knowing it to tle 18, section 1001, of the United States atutes which provide for fine and	Committee and the will be used for the a false statement, k	Secretary of Agricultur purposes indicated. In mowing it to be false, United States Code, an	of and certifies to the re that the above potatoes realize that the making of is a violation of title 18, nong other statutes which
SHIPPER'S NAMEADDRESS		RECEIVER'S NAMEADDRESS		
SIGNATURE		SIGNATURE		
<u>Instruction to Shipper</u> : Fill out this report for each Special Purpose Shipment. Sign all five copies. Mail the original (white) copy to the State Committee Office. Second copy (green) must accompany the shipment. Forward the yellow and pink copies to the receiver. Retain the gold copy for your files. FAILURE TO COMPLY WILL RESULT IN CANCELLATION OF CERTIFICATES.		Instruction to Receiver: Upon receipt of these forms, promptly complete the Yellow copy and mail to the State Committee office. Retain the pink copy for your files. FAILURE TO COMPLY WILL RESULT IN CANCELLATION OF CERTIFICATES PERMITTING SHIPMENTS OF SPECIAL PURPOSE POTATOES TO YOUR FIRM.		

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