This form is socilable electronically				Form Approved - OMB No. 0560-0120				
This form is available electronically. WA-105 U.S. Di				See Page 2 for Privacy Act and Paperwork Reduction Act Statements. EPARTMENT OF AGRICULTURE				
(10-31-11) Farm Service Agency								
		RETUR	NED AND	DESTROYED	RECEIPT RE	ECORD		
NAME AND ADDRESS OF WAREHOUSE OPERATOR			2. NAME AND LOCATION OF WAREHOUSE			3.	LICENSE NO.	
PART A - REC	CEIPTS							
RECEIVED				DEST	DESTROYED RETURNED TO WAREHOUSE OPERATOR			SE ODEDATOD
4. DATE (MM-DD-YYYY)	NUMBERED		7. BY WHOM		(OTED			SE OF ERATOR
	5. 6.			8. DATE	9. BY WHOM	10. DATE	11. BY WHOM	12. RECEIVED BY
	FROM	TO		(MM-DD-YYYY)	BY WHOW	(MM-DD-YYYY)	BT WHOW	RECEIVED BY
PART B – LIC	ENSES							
RECEIVED				RETURNED TO KCCO		RETURNED TO WAREHOUSE OPERATOR		
13. DATE (MM-DD-YYYY)	NUMBERED		16. BY WHOM	17.	18.	19. DATE	20.	21.
	14. LICENSE NO.	15. NAME	B1 WHOW	DATE (MM-DD-YYYY)	BY WHOM	(MM-DD-YYYY)	BY WHOM	HOM RECEIVED BY
22. REMARKS								
22 I authorit	a doctrication of	the above forms	,					
23. I authorize destruction of the above forms. A. SIGNATURE OF AUTHORIZED OFFICER OR B. DA'				E (MM-DD-YYYY)	MM-DD-YYYY) C. SIGNATURE OF WAREHOUSE D. DATE (MA		ATE (MM-DD-YYYY	
MANAGER				,	EXAMINER			

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NOTE

The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1423, 7 CFR Part 1427, the United States Warehouse Act (Pub. L. 106-472), and the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.). The information will be used to develop a record of returned and destroyed warehouse receipts and warehouse licenses. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated) and USDA/FSA-3, Consultants File. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to obtain new licensing or retain existing licensing under the United States Warehouse Act.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays an OMB control number. The valid OMB control number of this information collection is 0560-0120. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO THE KANSAS CITY COMMODITY OFFICE, WAREHOUSE LICENSE AND EXAMINATION DIVISION, STOP 9148, P.O. BOX 419205, KANSAS CITY, MO 64141-6205.

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