

**WA-308**  
(11-15-11)

**U.S. DEPARTMENT OF AGRICULTURE**  
Farm Service Agency

**WAREHOUSE OPERATOR'S STATEMENT AND EXAMINER'S COMPARISON OF OBLIGATIONS AND STOCKS**

**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 735, 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 document the warehouse operator's statement of total stocks and obligations and the examiner's measurement and comparison of the inventoried stocks and obligations. 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 a valid OMB control number. The valid OMB control number for this information collection is 0560-0120. The time required to complete this information collection is estimated to average 30 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.**

1. Date and Hour of Cut-Off <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	2. License Number <input type="checkbox"/> and/ or Code Number <input type="checkbox"/>
3. Name of Warehouse	4. Location of Warehouse (City and State)
5. Name of Warehouse Operator	

**6. Warehouse Operator's Statement of Total Stocks and Obligations for this Warehouse:**

	KIND/CLASS OF GRAIN															
A. STOCKS:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Bu.	Lbs.	Cwt.	Bu.	Lbs.	Cwt.	Bu.	Lbs.	Cwt.	Bu.	Lbs.	Cwt.	Bu.	Lbs.	Cwt.
(1) Stocks per company book (Last entry in DPR)																
(2) Activity, if any, to measurement cut-off, including adjustments	Inbound															
	Outbound															
(3) Stocks at cut-off																
<b>B. OBLIGATIONS:</b>																
(1) Received Obligations:																
(a) To Others																
(b) To Warehouse Operator																
(2) Non-Received Obligations:																
(a) To Others																
(b) To Warehouse Operator																
(c) Balance on CCC Loading Order																
(3) Total Obligations																
(4) Less agricultural products transferred to other warehouses for storage																
(5) Total obligations in this warehouse																
(6) Do you have any type of agreement with a field warehouse company? <input type="checkbox"/> YES <input type="checkbox"/> NO If "YES", has this been cleared with USDA? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "NO", furnish copy to examiner).																

**7. Warehouse Operator's Certification:**

*I hereby certify to the U.S. Department of Agriculture and the Commodity Credit Corporation, subject to penalties of applicable laws for knowing false representations and similar offenses (e.g., 15 U.S.C. 714m and 18 U.S.C. 1001) that the information contained in the above Warehouse Operator's statement is, to the best of my knowledge and belief, a true, correct and complete statement, and that I have no obligations as a Warehouse Operator to deliver any agricultural product to any person as of the date and hour shown above, other than as indicated in this statement. I understand that the examination by a representative of the U.S. Department of Agriculture in connection with which this statement is furnished and the information contained herein does not relieve me of any responsibilities under the U.S. Warehouse Act or any Agreement I have entered into with the Commodity Credit Corporation.*

A. Signature of Warehouse Operator or Authorized Agent	B. Title	C. Date Signed (MM-DD-YYYY)	D. Name of Warehouse Examiner Witnessing Signature
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**8. Examiner's Comparison of Warehouse Operator's Obligations and Inventoried Stocks:**

A. Measured inventory				
B. Difference in Items 6B(5) and 7A				
C. Percentage of difference				
D. Receipted to CCC Date of Listing				

**WAREHOUSE OPERATOR'S STATEMENT AND EXAMINER'S COMPARISON OF OBLIGATIONS, INVENTORIED STOCKS, AND RELATED INFORMATION**

**9. Cut-Off Information:**

A. Scale Tickets					B. Truck/Car/Barge		C. Draft or Check		D. Other	
In					No.	In	No.			
Out					No.	Out	Date (MM-DD-YYYY)			

**10. Warehouse Receipt Information:**

A. Type	B. Out-Stand-ing Last Exami-nation	C. Used Since Last Exami-nation	D. Can-Celled Since Last Exami-nation	E. Out Stand-ing This Exami-nation	F. Unused W/R On Hand Last Examination			G. Used Since Last Examination			H. Unused W/R On Hand This Examination			I. Ware-house Receipts Canceled Through No.	
					From	To	No.	From	To	No.	From	To	No.		

**11. Warehouse Operator's Statement of Commodities Transferred to Other Warehouses for Storage (Complete Form WA-300)**

A. Name and Address of Warehouse	B. Date Shipped (MM-DD-YYYY)	C. Kind/Class	D. Grade	E. Quantity

**12. Storage obligations not covered by warehouse receipts from listings prepared by Warehouse Operator (Not listed on Form WA-312, Page 2).**

A. Identification	B. Date (MM-DD-YYYY)	C. Kind/Grade or Kind/Class ( <input type="checkbox"/> Bu. <input type="checkbox"/> Lbs. <input type="checkbox"/> Cwt.)				
13. Total Non-Receipted Obligations						
14. MINUS-Transferred to Other Warehouses						
15. Net Total Stored in This Warehouse						

16A. Signature of Examiner	16B. Date Signed (MM-DD-YYYY)
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