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**WA-88**  
(10-31-11)

Form Approved - OMB No. 0560-0120

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

**RECEIPT FOR ELIGIBLE SECURITIES ACCEPTED AS SECURITY**

1. Name of Warehouse Operator	2. City	3. State
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The undersigned hereby acknowledges receipt of the securities herein-after described, deposited as security in lieu of surety or sureties on UNITED STATES WAREHOUSE ACT BOND, filed with THE SECRETARY OF AGRICULTURE, through the KANSAS CITY COMMODITY OFFICE, for WAREHOUSE OPERATOR'S BOND. Said securities 1/ are registered in the name of \_\_\_\_\_

\_\_\_\_\_, and are assigned \_\_\_\_\_

4. Applicable Name 5. In blank; to bearer; or to [identity of assignee];  
See 31 CFR Part 306.41.

A. Title of Securities	B. Coupon or Registered	C. Total Face Amount \$	D. Denomination	E. Serial Number	F. Interest Dates

This receipt is executed in duplicate, and the original must be surrendered by the Warehouse Operator/Securities Owner before the above described bonds or notes deposited are returned to Warehouse Operator/Securities Owner.

6A. Signature of Authorized FSA Representative	6B. Title	6C. Date (MM-DD-YYYY)
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**1/** This information to be furnished only in case of registered securities.

**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 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 acknowledge receipt of securities pledged on WA-83 - Warehouse Operator's Bond (For Eligible Securities) from the warehouse operator. 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 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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