

USE REPORT OF SALES OF RESTRICTED-USE OR PERMIT-USE PESTICIDES

DEALER NAME: _____

DEALER FIRM: _____

October 1, ____ - September 30, ____

Date	License #	Certified Applicator/Permit Holder	No. of Units	Wt./ Vol Each Unit	Total Wt./Vol Sold	Pesticide Purchased (EPA Number, Trade Name and Manufacturer)