Washington State Department of Agriculture
Office of Compliance & Outreach
PO Box 42591
Olympia WA 98504-2591
Telephone (360) 902-2052
FAX (360) 902-2087

FORM 4309B

SEMI-ANNUAL COMMERCIAL FEED INSPECTION FEE REPORT

(Please see instruction sheet for completing form)
This form must be completed if you listed any tonnage on line 1c of form 4309 or line 1b of form 4331

A

REPORTING PERIOD

Check the applicable box and enter year: ☐ January 1- June 30, 20 ☐ July 1 – December 31, 20

B
Enter the Company name and company number listed on form 4309 or 4331, box B:

COMPANY NAME

COMPANY #

C
Only Responsible Buyers may be listed on this form (see directions on page 3 of instruction sheet.) List the facility/location name, address and the tons distributed. The information you provide on this form will be verified against the inspection reports from the companies you have listed.

		TONS	For Dept. Use Only
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
Company Name:			
Address:			
GRAND TOTAL:	**(This amount must equal the amount listed on form 4309, line 1c or form 4331, line 1b)**	D	