

4) Were any pesticides used on the hemp before planting? YES NO

If "Yes," indicate: _____

5) Is any harvest listed in Question (4) of floral material? YES NO

- If "Yes", note that you are prohibited from co-mingling or moving your harvest from its storage location until you have received acceptable test results.

6) Are the harvested industrial hemp materials to be transported offsite? YES NO

If "Yes," indicate licensed location: _____

7) Indicate if you have any other industrial hemp growing on your property. YES NO

NOTE: If you are growing any other industrial hemp NOT reported on this form, you will need to complete another Harvest/Destruction Report form at least 15 days prior to harvest or destruction.

By signing my name below, I attest that I am the license holder or authorized by the license holder to submit this form and that this information is accurate and complete.

Printed Name: _____

Signature: _____ Date: _____

<p>Mail to: ATTN: Caleb Allen ADA Industrial Hemp Program 1 Natural Resources Dr. Little Rock, AR 72205</p>
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Email to: Industrialhemp@agriculture.arkansas.gov