ARKANSAS STATE PLANT BOARD

Cotton Miscellaneous Inspection Form

Name of Cotton Production Co	ompany:
Name of Gin:	
Name of Grower:	
Name of Variety:	
Planter Inspections: <u>Date</u>	<u>Comments</u>
Early Season Inspection: <u>Date</u>	
Mid Season Inspection: <u>Date</u>	
Final Inspection: <u>Date</u>	
Harvesting equipment Inspect	
<u>Date</u>	Equipment Inspected
	Grower

Area Production Manager