

Iowa Sheep and Wool Promotion Board
P.O. Box 1969, Ames, IA 50010
Quarterly Sheep and Wool Assessment Remittance

Name of First Purchaser

Representing (if applicable)

Address	City	State	Zip
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Phone

Report for _____, 20____

Amount of wool purchased _____ lbs.

Total Wool Remittance (pounds wool X \$.02/lb) \$ _____

Number of sheep purchased _____

Total Sheep Assessment Rate (head X \$.10/hd) _____

TOTAL IOWA SHEEP AND WOOL ASSESSMENT RATE REMITTANCE \$ _____

I hereby certify under penalty of law that the information contained in this Iowa Sheep and Wool Promotion Board quarterly report is true and accurate.

Signature	Title	Date	Phone Number
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Make Check Payable and Mail to:
Iowa Sheep and Wool Promotion Board
P.O. Box 1969
Ames, IA 50010