SAMPLE PESTICIDE RECORD KEEPING FORM													
APPLICATOR:					CONTACT NUMBER:			ADDRESS:					
DATE	APPLICATOR	LOCATION & DESCRIPTION OF TREATED AREA	SIZE OF AREA TREATED	CROP TREATED	PRODUCT BRAND NAME	ACTIVE INGREDIENT(S)	EPA REG. NO.	LABEL RATE USED	TOTAL AMOUNT OF PRODUCT USED	TOTAL VOLUME (IF DILUTED)	REI (RESTRICTED ENTRY INTERVAL)	DATE / START TIME	DATE / END TIME