Please photocopy this form and fill in for each sales channel daily. Submit to HKORC-Cert monthly by mail, fax or E-mail by the first week of every month.

Farm:＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿ Applicant/Operators:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certificate Number:＿＿＿＿＿＿＿＿＿

Sales Channel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Record Period：201\_\_/\_\_\_\_/\_\_\_\_ to 201\_\_/\_\_\_\_\_/\_\_\_\_

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|  | 201\_\_/\_\_\_\_ |
| Products | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |  |
| *Ex: Cabbage* | *10 Catty* | *5 Catty* | *20 Catty* |  |  |  | *10 Catty* |  | *15 Catty* |  |  | *8 Catty* |  | *2 Catty* | *6 Catty* |  |
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 (Please use additional form if needed)

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Farm:＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿ Applicant/Operators:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certificate Number:＿＿＿＿＿＿＿＿＿

Sales Channel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Record Period：201\_\_/\_\_\_\_/\_\_\_\_ to 201\_\_/\_\_\_\_\_/\_\_\_\_

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|  | 201\_\_/\_\_\_\_ |
| Products | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| *Ex: Cabbage* | *10 Catty* | *5 Catty* |  | *20 Catty* | *10 Catty* |  | *15 Catty* |  |  | *6 Catty* |  | *8 Catty* |  | *2 Catty* |  |  |
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