

## Alaska Division of Agriculture Hemp Program

## **Processor Records**

Any person registered to process industrial hemp from its raw form to any other form shall maintain documentation of the source of the raw hemp material and keep records of the processed hemp batch in accordance with 11 AAC 40.330. The registered processor shall keep and maintain records for a minimum of three years and these records shall be made available to the division or authorized representative of the division within three business days of request.

<u>Directions:</u> Complete all parts of the following form and submit to the division upon request. It is the sole responsibility of the registrant to maintain and keep this documentation. The form must be complete, accurate and legible. Follow all instructions in the document. Be sure to keep a copy of the full report for your records.

Upon request, the completed form may be filed electronically, mailed, or hand-delivered to the division. For the electronic mail submission of the records, please send completed forms to <a href="mailto:industrialhemp@alaska.gov">industrialhemp@alaska.gov</a>. To facsimile a completed form, send to 907-746-1568. To post mail a completed form, send to Alaska Plant Materials Center Hemp Program, 5310 S. Bodenburg Spur, Palmer, AK 99645.

Registered Processor Name:		
Name of Signing Authority on License (if business):		
Registration Number:		
Email:	Phone:	

- **1) Industrial Hemp Acquisition**. Complete the table below detailing who provided the industrial hemp, where it was grown, and what variety/strain was grown.
  - a) Supplier that provided industrial hemp. Attach additional page(s) as necessary.

Seller or Supplier of the Industrial Hemp					
Source Name:					
Registration Number:					
State of Registration:					
Email:	Phone:				
Grow Site Address					
Street Address:	City:				
State:	Zip Code:				
GPS: Latitude:	GPS: Longitude:				
(Ex. 38° 9.919'N)	(Ex. 84° 49.276'W)				
Industrial Hemp Information					
Variety/Strain Received and Lot Number		Date of Acquisition	Quantity Received		

**b)** Additional Supplier that provided industrial hemp. Attach additional page(s) as necessary.

Seller or Supplier of the Industrial Hemp					
Source Name:					
Registration Number:					
State of Registration:					
Email:	Phone:				
Grow Site Address					
Street Address:	City:				
State:	Zip Code:				
GPS: Latitude: (Ex. 38° 9.919'N)	GPS: Longitude: (Ex. 84° 49.276'W)				
Industrial Hemp Information					
Variety/Strain Received and Lot Number		Date of Acquisition	Quantity Received		

**2) Processed Batch(es).** Complete the following table below detailing records kept for each batch of processed industrial hemp. Attach Additional page(s) as necessary.

Processed Date	Lot Number	Batch Number	Amount Processed	Extraction Method

3) Attach any tests or test results conducted on the hemp in original or processed form, identified by lot and batch number of the tested hemp.