Instruction: Fill this form completely. Also Write <u>any other management practice done</u> e.g weeding, pruning, Rouging-off etc.

DATE (Enaku z'omwezi)	PEST/DISEASE /PROBLEM (Ebiwuka/endwade/ekizibu)	CHEMICAL NAME (Erinya lye'ddagala)	ACTIVE INGREDIENT (Ekirungo)	QUANTITY OF PESTICIDE USED IN PUMP (gm/ml) Ebipimo ebigenda okukozesebwa	VOLUME OF WATER INTO THE TANK/PUMP (LITRES) (Omuwendo gwamazzi agatebweddwa mu tanka oba bomba)	NO. OF FULL PUMPS APPLIED (Okubye Bomba mekka?)	AREA SPRAYED (Kitundu ki kyokubye eddagala?)	PHI (Eddagala ligwamu ddi mubirime?)	NAME OF SPRAYER (Amaanya g'oyo akkubye eddagala)
7/9/2[illegible]	Thrips	OSHO							
		[illegible] in [illegible]							
16/9/2[illegible]	Thrips			20ml	20 Litres	30 pump	n/a	3 days	1V A+1 [illegible]
		[illegible] Code							
23/?/2[illegible]	Thrips	[illegible]	[illegible]	9c ml	20 Litres	5 [illegible] pump	n/a	0 day	1V [illegible]
		Co o	AZADIR[illegible]	90ml	20 Litres	33 pump	n/a	0 day	1Sa [illegible]

Instruction: Fill this form completely. Also Write any other management practice done e.g weeding, pruning, Rouging-off etc.

DATE (Enaku z'omwezi)	PEST/DISEASE /PROBLEM (Ebiwuka/endwadde/ekizibu)	CHEMICAL NAME (Erinya lye'ddagala)	ACTIVE INGREDIENT (Ekirungo)	QUANTITY OF PESTICIDE USED IN PUMP (gm/ml) Ebipimo ebigenda okukozesebwa	VOLUME OF WATER INTO THE TANK/PUMP (LITRES) (Omuwendo gwamazzi agatebweddwa mu tanka oba bomba)	NO. OF FULL PUMPS APPLIED (Okubye Bomba mekka?)	AREA SPRAYED (Kitundu ki kyokubye eddagala?)	PHI (Eddagala ligwamu ddi mubirime?)	NAME OF SPRAYER (Amaanya g'oyo akkubye eddagala)
7/9/2[illegible]	Thrips	[illegible]							
		[illegible] in [illegible]							
16/9/2[illegible]	Thrips			30ml	20 Litres	30 pump	n/a	3 days	[illegible]
		[illegible]							
23/9/2[illegible]	Thrips	[illegible]	[illegible]	9c ml	20 Litres	5 pump	n/a	0 day	[illegible]
		[illegible]		90ml	2 Litres	33 pump	n/a	0 day	[illegible]
			AZADIRACHTIN						

CamScanner

HARVEST SLIP TO SUPPLY PLANT PRODUCTS FOR EXPORT

HARVEST SLIP 7 Please tear off the required form during each harvest/supply

Weekly Harvestable Volume (Kg).....	GPS: Long: ..... Lat:	Product: Fan Dried Eggs	Supervisor Nan Signatures/Star
Supply Date 29 / 9 /2025	Registration Period .....to...../2024	Farmer Traceability Code UG/...../...../.....	Cnl: Dr. Ssamu
Lead Farmer Name Contact & Signature Nyombi Tomas (0782238414) **Validity Date:** 31st /Jan /2025	**Farmer Name** Contact & Signature 0782238414	**Company(ies) supplied& Weight (Kg)** 1. Cosmos 2. 3 Hills 3.	Chm: Mrs. Ch Nakijjoba L.

Note: *Farmer is entirely responsible for the Compliance of the Produce. Document should reach OPERATORS by 5:00 PM*

HARVEST SLIP 8 Please tear off the required form during each harvest/supply

Weekly Harvestable Volume (Kg).....	GPS: Long: ..... Lat:	Product:	Supervisor Signatures/
Supply Date ...../...../2024	Registration Period .....to...../2024	Farmer Traceability Code UG/...../...../.....	Cnl: Dr. Ssa
Lead Farmer Name Contact & Signature Nyombi Tomas (0782238414) **Validity Date:** 31st /Jan/2025	**Farmer Name** Contact & Signature	**Company(ies) supplied& Weight (Kg)** 1. 2 3.	Chm: Mrs. Nakijjoba

Note: *Farmer is entirely responsible for the Compliance of the Produce. Document should reach OPERATORS by 5:00 P*

HARVEST SLIP 9 Please tear off the required form during each harvest/supply

Weekly Harvestable Volume (Kg)	GPS: Long: ..... Lat:	Product:	Supervise Signature
Supply Date ...../...../2024	Registration Period .....to...../2024	Farmer Traceability Code UG/...../...../.....	Cnl: Dr. S
Lead Farmer Name Contact & Signature Nyombi Tomas (0782238414)	Farmer Name Contact & Signature	**Company(ies) supplied & Weight (Kg)** 1. 2. 3.	Chm: Mrs. Nakijjoba