

Farmer Name: <i>Nyambi T</i> Contact & Signature: <i>0782238414</i> Validity Date: <i>31 Jan 2024</i>	Company(ies) supplied & Weight (Kg) 1 <i>Go Green</i> 2 <i>350/eggs</i> 3	Client: Mrs. Christine Nakiyibwa L
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Note: Farmer is entirely responsible for the Compliance of the Produce. Document should reach OPERATORS by 5:00 PM of supply Date

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

Weekly Harvestable Volume (Kg)	GPS: Long: _____ Lat: _____	Product: <i>Go Green Egg</i>	Supervisor Names & Signatures/Stamp Znl: Dr. Ssamula Alexander Client: Mrs. Christine Nakiyibwa L
Supply Date: <i>14/1/2024</i>	Registration Period: _____ to _____ /2024	Farmer Traceability Code: <i>UG/112/01/1-0263</i>	
Lead Farmer Name: <i>Nyambi T</i> Contact & Signature: <i>0782238414</i>	Farmer Name: <i>Nyambi T</i> Contact & Signature: <i>0782238414</i>	Company(ies) supplied & Weight (Kg) 1 <i>Go Green</i> 2 <i>Nyambi T</i> 3	
Validity Date: <i>31 Jan/2024</i>	Note: Farmer is entirely responsible for the Compliance of the Produce. Document should reach OPERATORS by 5:00 PM of supply Date		

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

Weekly Harvestable Volume (Kg)	GPS: Long: _____ Lat: _____	Product: _____	Supervisor Names & Signatures/Stamp Znl: Dr. Ssamula Alexander Client: Mrs. Christine Nakiyibwa L
Supply Date: <i>14/1/2024</i>	Registration Period: _____ to _____ /2024	Farmer Traceability Code: <i>UG/112/01/1-0263</i>	
Farmer Name & Signature: <i>Nyambi T</i> <i>0782238414</i>	Farmer Name: _____ Contact & Signature: _____	Company(ies) supplied & Weight (Kg) 1 _____ 2 _____ 3 _____	
Note: Farmer is entirely responsible for the Compliance of the Produce. Document should reach OPERATORS by 5:00 PM of supply Date			

HARVEST INSPECTION FORM

Instruction: To be used on every Harvest

Date (Omunaku hwa'akungud de)	Harvested BLOCK/Sec tion h (Ekitundu Wogyo byokungud de)	Quantity from that Block/section (lungyi ki bwo- kungudde akuwa mwekya ekitundu) (Kg)	Pest/Disease/Problem Observed (Ebiwuka/endwade/ekizibu) (GOLOLA KU'KYOLABYE) Enamba zino zitegeza kyolabye, era-Ziwandikidwa wansi Kulupapula luno	Quantity With Pest/Disease/Proble m (Omunwendo gwe'birime ebiriko Ebiwuka /endwade/ekizibu)	Quantity to Supply (Kg) And Company Name	Quantity Not to be supplied (for Export/re ject) Or to go to Local Market
WEEK NUMBER: 18						
28/2/25	A/B	520Kg	Okwekebega byokungudde kyetaaga kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company	20Kg	450Kg	10Kg
WEEK NUMBER: 19						
28/2/25	A/B	450Kg	Okwekebega byokungudde kyetaaga kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company	100Kg	350Kg	100Kg
WEEK NUMBER: 20						
28/2/25	A/B	320Kg	Okwekebega byokungudde kyetaaga kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company	20Kg	300Kg	20Kg
WEEK NUMBER: 21						
14/3/25	A/B	602	Okwekebega byokungudde kyetaaga kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company	102Kg	500Kg	102Kg
WEEK NUMBER: 22						
			Okwekebega byokungudde kyetaaga kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company			
WEEK NUMBER: 23						
			Okwekebega byokungudde kyetaaga kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company			

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

[illegible]

[illegible]

Test Disease/Problem Identification Key (English) English/Italiano		Epidemiologia/Endemiologia - GOLDEN RING	
1. Disease/Problem	1. Epidemic/Endemic	1. Epidemic/Endemic	1. Epidemic/Endemic
2. Disease/Problem	2. Epidemic/Endemic	2. Epidemic/Endemic	2. Epidemic/Endemic
3. Disease/Problem	3. Epidemic/Endemic	3. Epidemic/Endemic	3. Epidemic/Endemic
4. Disease/Problem	4. Epidemic/Endemic	4. Epidemic/Endemic	4. Epidemic/Endemic
5. Disease/Problem	5. Epidemic/Endemic	5. Epidemic/Endemic	5. Epidemic/Endemic
6. Disease/Problem	6. Epidemic/Endemic	6. Epidemic/Endemic	6. Epidemic/Endemic
7. Disease/Problem	7. Epidemic/Endemic	7. Epidemic/Endemic	7. Epidemic/Endemic
8. Disease/Problem	8. Epidemic/Endemic	8. Epidemic/Endemic	8. Epidemic/Endemic
9. Disease/Problem	9. Epidemic/Endemic	9. Epidemic/Endemic	9. Epidemic/Endemic
10. Disease/Problem	10. Epidemic/Endemic	10. Epidemic/Endemic	10. Epidemic/Endemic
11. Disease/Problem	11. Epidemic/Endemic	11. Epidemic/Endemic	11. Epidemic/Endemic
12. Disease/Problem	12. Epidemic/Endemic	12. Epidemic/Endemic	12. Epidemic/Endemic

FIELD FORMS (SPS DOCUMENTS)

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LEAD FARMER NAME: Mr. NIONG GROUP NAME: WARRIOR GARDEN
FARMER NAME: SIMWETRA ZEMVERO FARMER CODE: UGI
PLANTING DATE 23/12/2025 IPEARHEADED BY: Mrs. Chantone Phibong

LEAD FARMER NAME: Mr. NIONG GROUP NAME: WARRIOR GARDEN
FARMER NAME: SIMWETRA ZEMVERO FARMER CODE: UGI
PLANTING DATE 23/12/2025 IPEARHEADED BY: Mrs. Chantonee

LEAD FARMER NAME: Mr. MIONG GROUP NAME: W. P. S. GARDEN N.
FARMER NAME: SIMWETRAZAKVERA FARMER CODE: UGI
PLANTING DATE 23/12/2025 IPEARHEADED BY: Mrs. Chantonee

LEAD FARMER NAME: Mr. MIONG GROUP NAME: W. P. S. GARDEN N.
FARMER NAME: SIMWETRAZAKVERA FARMER CODE: UGI
PLANTING DATE 23/12/2025 IPEARHEADED BY: Mrs. Chantonee

VALIDATED AND APPROVED BY: [Signature] Signature..... Stamp

VALIDATED AND APPROVED BY: [Signature] Signature..... Stamp