



GARDEN EGG (NTOLA) 707525

FIELD FORMS (SPS DOCUMENTS)

32158215

EACH GARDEN/FARM SHALL HAVE ITS OWN FORMS. THESE FORMS ARE REQUIRED TO TRADE.



LEAD FARMER NAME: KAMU G. SITA INUBOSHO GROUP NAME: Kumukunda-12 Phase 2 & 3

FARMER NAME: Kamugisha Inubosho FARMER CODE: UGI 104/01/5016 GARDEN No. 3

PLANTING DATE: 24/4/25 SPEARHEADED BY: ...Mrs. CHRISTINE NAKIJJOBA LUBWAMA...

APPROVED BY: ...Dr. SSAMULA ALEXANDER...

Signature

Stamp

MONTHLY SCOUTING FORM

09/04/2016

WEEK NUMBER:																
Okwekebegya ennimiro kyetaago kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company																
MONDAY		19000	1	2	3	4	5	6	7	8	9	10	11	12	13	
WEDNESDAY		19000	1	2	3	4	5	6	7	8	9	10	11	12	13	
FRIDAY		19000	1	2	3	4	5	6	7	8	9	10	11	12	13	
SATURDAY		19000	1	2	3	4	5	6	7	8	9	10	11	12	13	
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- Pest/Disease/Problem Identification Key (Engeri gyogyuzaamu Ebiwuka/endwade/ekizibu – GOLOLA KU KYOLABYE)
1. Thrips (Obulolo/Ekigenge)
 2. Aphids (Muwempe)
 3. Fruit fly (Empiso/Kalankoma)
 4. FCM (Mosi/moth)
 5. Fruit borer (Moggo)
 6. Cotton boll worm (Eksanyi kya kiragala)
 7. Fall Army worm (Eksanyi kya kitaka taka)
 8. Fungal infection (Empumbu, obutolobogyo, amabwa)
 9. Viral infection (Virasi/matu gambuzi)
 10. Bacterial/Fungal infection (Kiwotoke/obutolobogyo/Okwefunba)
 11. Nutrient deficiency (Ekrisa temuli)
 12. Weeds (omuddo)
13. Others (Specify) (BWEKIBA TEKIRI KUBINNO, KIWANDIKE KULUPAPULA LUNO)

Instructions: Fill this form completely. Also write any other management practice done e.g. weeding, pruning, Rousing, etc.

UG/104/21/8816

SPRAY AND FIELD MANAGEMENT FORM

Farmer Name (Amaanya go): <i>Namuyika</i>	Crop (Ekitime): <i>Ground egg</i>	Name of Supervisor (Amaanya go): <i>Supervisor wabaka eddagala</i>
Farmer Code: (Koodi cyakuwebwa): <i>UG/104/21/8816</i>	Weather Condition (Embera y'obudde): <i>Sunny</i>	

DATE (Enaku ziromwe)	PEST/DISEASE (PROBLEM)	CHEMICAL NAME (Eniya lye ddagala)	ACTIVE INGREDIENT (Ekitime)	QUANTITY OF PESTICIDE USED (IN PUMP)	VOLUME OF WATER INTO THE TANK/PUMP (GALLONS)	NO. OF FULL PUMPS	AREA SPRAYED (Kintundu)	PHI (Eddagala)	NAME OF SPRAY
20/7/25	Pest	Nudu Asenderu	Abundin	40ml	20 litres	60	All	3 days	1 spray
20/7/25	Pest	Kozigotro	Rumbi	40ml	20 litres	67	All	3 days	1 spray
16/8/25	Control	okogeston	Abundin	40ml	20 litres	67	All	3 days	1 spray
22/8/25	Control	Parafone	Abundin	40ml	20 litres	68	All	3 days	1 spray
08/9/25	Control	okogeston	Abundin	40ml	20 litres	68	All	3 days	1 spray
20/9/25	Control	okogeston	Abundin	40ml	20 litres	69	All	3 days	1 spray
24/10/25	Control	Kozigotro	Abundin	40ml	20 litres	68	All	3 days	1 spray
20/10/25	Control	okogeston	Abundin	40ml	20 litres	69	All	3 days	1 spray

89/104/01/5016

HARVEST INSPECTION FORM

Instruction: To be used on every Harvest

Date (Olunaku lwo'kungud de)	Harvested BLOCK/Sec tion h (Ekitundu Wogy'e byokungud de)	Quantity from that Block/section (Bungyi'ki bwo- kungunde okuva mwekyo 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 (Omwendu gwe'birime ebiriko Ebiwuka /endwade/ekizibu)	Quantity to Supply (Kg) And Company Name	Quantity Not to be supplied (for Export/re lect) Or to go to Local Market
WEEK NUMBER:	Okwekebeya byokungunde kyetaago kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company	14/10/95	01	950	950	950
17/10/95	2000	1	2	3	4	5
19/10/95	2000	1	2	3	4	5
24/10/95	2000	1	2	3	4	5
WEEK NUMBER:	Okwekebeya byokungunde kyetaago kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company	31/10/95	950	1	2	3
WEEK NUMBER:	Okwekebeya byokungunde kyetaago kyokutwala ebirime ebweru, wereza ebiwandiko bino ku company					
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HARVEST SLIP TO SUPPLY PLANT PRODUCTS FOR EXPORT

HARVEST SLIP 4

Please tear off the required form during each harvest/supply

Weekly Harvestable Volume (Kg)..... <i>2000 kg</i>	GPS: Long: <i>32...58...27</i> Lat: ... <i>0...27...0</i>	Product: <i>Garden egg</i>	Supervisor Names & Signatures/Stamp
Supply Date <i>31st / Dec / 2025</i>	Registration Period <i>November to Dec / 2025</i>	Farmer Traceability Code <i>UG / 104 / 01 / 5016</i>	<i>Zel: Dr. Ssamula Alexander</i> BEVERLY ME...
Lead Farmer Name Contact & Signature <i>Wamugisha John Bosco</i> <i>077249879</i>	Farmer Name Contact & Signature <i>Wamugisha John Bosco</i> <i>077249879</i>	Company(ies) supplied & Weight (Kg) <i>1. Newmans Food 251300g</i> <i>2. Ufale Industries Ltd 1500g</i> <i>3.</i>	<i>Chm: Mrs. Christine Nakijjoba L.</i> ORBUA... ...SAMULA (U)
Validity Date: <i>31st / Dec / 2025</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 5

Please tear off the required form during each harvest/supply

Weekly Harvestable Volume (Kg).....	GPS: Long: Lat:	Product:	Supervisor Names & Signatures/Stamp
Supply Date/...../2025	Registration Periodto...../2025	Farmer Traceability Code UG/...../...../.....	Znl: <i>Dr. Ssamula Alexander</i> HEAD FARMERS
Lead Farmer Name Contact & Signature	Farmer Name Contact & Signature	Company(ies) supplied & Weight (Kg) 1. 2. 3.	Chm: <i>Mrs. Christine Nakijoba</i> PROBUD
Validity Date:/...../2025			