Colorado Sheep & Wool Authority

REFUND APPLICATION FOR SHEEP MARKETED IN OR FROM COLORADO BY FEEDERS

Feeder Information _____ **Report for the Month of**_____

Name of Feedlot_____

Address_____**City**_____**State**_____ **Zip Code**_____

Email_____

Buyer Information: List all buyers of lambs.

Name	Address	City	Zip Code	# of Sheep Assessed	Assessment Deducted ($0.25/head)	Date of Sale	Office Use
TOTAL ASSESSMENTS DEDUCTED							

Certification: I hereby certify that the above information is correct and accurate to the best of my knowledge. I am aware that false information or failure to report may result in civil and administrative penalties.

_____

Feeder's Signature ***Date***

I understand that I am entitled to receive up to 75% of the assessment remitted, if I submit my refund request on time. The following options are available: $_____*Full Refund* $_____*Partial Refund*

$_____*I want all or part of my refund donated to the Colorado Wool Growers Association for legislative purposes.*

Make Checks Payable to the Colorado Sheep & Wool Authority

Mail payment and assessment report to

Colorado Sheep & Wool Authority
PO Box 292 ● Delta, CO 81416-0292

cwgawool@aol.com ● coloradosheep.org
(970) 874-1433 ● (970) 874-4170 fax