Approved By:	

Format for Sample Coupon

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Effective Date: 1 5 OCT 2007

W-1030	S.No.
Region_	Unit
1.	Name of Seed Processing Plant/Seed Godown
2.	Name of Sub Unit
3.	Name of Seed Processing Plant/Seed Godown Name of Sub Unit Processed Un processed Class of Seed/Breeder/Foundation/Stock/Certified/Pedirgreed/T I
4.	Class of Seed/Breeder/Foundation/Stock/Certified/Pedirgreed/T.L.
5.	Reason for Test/Procurement/Certification/Revalidation/Internal Quality Control.
6.	Crop
	Variety
7.	Lot No.
8.	Name of official drawing sample Date of Sampling
9.	Total Qty.of lot from which sample was drawn
40	QtlsKg.
10.	Requirement of Testing
	Germination Physical Purity
	Moisture Health Testing
	Moisture Health Testing Grow Out Test Any Other test required
11.	Indicate for fresh procurement/1st test/2nd test/3rd test
12.	Name of treatment material if treated
13.	Name & Address of Forwarding Official
	(to be kept in each sample bag)

(Signature of sample drawing official)

नियंत्रित CONTROLLED