

**Seed Savers
RETURN FORM**

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Vegetable Type:

Vegetable Type:

Vegetable Type:

Variety:

Variety:

Variety:

Your Name:

Your Name:

Your Name:

Your Town:

Your Town:

Your Town:

Year Grown:

Year Grown:

Year Grown:

GROWING RECORD

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*IF YOU CHOOSE TO SAVE SEEDS,
PLEASE SHARE THE FOLLOWING
INFORMATION WITH US
TO HELP KEEP OUR SEED STOCK PURE*

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Isolation Distance:

Isolation Distance:

Isolation Distance:

Number Planted:

Number Planted:

Number Planted:

Was the plant disease free?

Was the plant disease free?

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If no, describe:

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Notes: *(taste, growing conditions, etc.)*

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