

License # \_\_\_\_\_ License Type \_\_\_\_\_ Mail Firm # \_\_\_\_\_  
**PRINT OR TYPE** **LICENSE EXPIRES APRIL 30, 20**\_\_\_\_\_

Business Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Licensee Name \_\_\_\_\_ Fax Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**Check License Types Required** (Persons acting as both a grower and dealer must pay both fees.)

91 **Ginseng Grower** License Fee: **\$25.00**

92 **Ginseng Dealer** (buys ginseng for resale, broker) License Fee: **\$25.00**

\*\*\*\*\***PLEASE COMPLETE INFORMATION**\*\*\*\*\*

**BELOW**\*\*\*\*\*

The reporting period is from May 1<sup>st</sup> to April 30<sup>th</sup> this year. To convert green weight to dry weight, multiply by .25 (25%).

**GROWERS:**

**Total Harvest:** \_\_\_\_\_ Lbs. (Dry Wt.)

**Total Sales to:** In-state (uncertified) \_\_\_\_\_ Lbs. (Dry Wt.)

Out-of-State (self-certified) \_\_\_\_\_ Lbs. (Dry Wt.)

**DEALERS:**

**Total Ginseng Bought:** Oregon-Grown \_\_\_\_\_ Lbs. (Dry Wt.)

Out-Of-State \_\_\_\_\_ Lbs. (Dry Wt.)

**List States and Amounts:** \_\_\_\_\_ Lbs. (Dry Wt.)

\_\_\_\_\_ Lbs. (Dry Wt.)

\_\_\_\_\_ Lbs. (Dry Wt.)

\_\_\_\_\_ Lbs. (Dry Wt.)

**Total Ginseng On Hand:** \_\_\_\_\_ Lbs. (Dry Wt.)

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Print Owner's Name \_\_\_\_\_ SSN# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

**Return this form with your remittance payable to Oregon Department of Agriculture.**

**For Checks or Money Orders Mail to:**

Oregon Department of Agriculture  
PO Box 4395, Unit 16  
Portland OR 97208-4395

**For Credit Card Charges Mail or Fax to:**

Oregon Department of Agriculture  
Attn: Licensing  
635 Capitol Street NE  
Salem OR 97301-2532  
Fax (503) 986-4746

\_\_\_\_ Visa \_\_\_\_ Mastercard Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Card Number \_\_\_\_\_ (16 digits)

Total Charges \$ \_\_\_\_\_ Signature \_\_\_\_\_