HANDLER MATERIALS INVENTORY

Year _____ **Name** _____

List all product information for indirect production use, including cleaning agents for equipment and surfaces and pest control

***Composition information for all materials must be included in your documents at MOSA. Updated or new formulations must be submitted.**

Product Name	**Manufacturer/Source**	**Where Used** Describe location, specific equipment, etc.	**Why Used** S=Sanitation P=Pest Mgmt. O=Other (specify)	**Is there organic product contact?**	***Composition Info At MOSA**
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
				☐ Yes ☐ No	
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				☐ Yes ☐ No	
				☐ Yes ☐ No	

WEBSITE: www.mosaorganic.org
ADDRESS: P.O. Box 821, 122 West Jefferson Street, Viroqua, WI 54665
EMAIL: mosa@mosaorganic.org **PHONE:** 608.637.2526 **FAX:** 608.637.7032

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