

## Kansas Industrial Hemp Research Program

### Processing Report (Processor)

Please review K.A.R. 4-34-20 (Reports) before completing and submitting the required document.

#### **K.A.R. 4-34-20(g). Processing report**

(g) Each primary licensee on a research processor license shall annually submit a completed processing report no later than November 30. Each processing report shall include the following, at a minimum:

(1) The amount of industrial hemp plants, plant parts, or grain processed by the licensee, which shall be provided as follows:

(A) If the industrial hemp crop was cultivated, planted, or grown for the production of fiber and was processed, the number of bales and the size and shape of the bales;

(B) if the industrial hemp crop was cultivated, planted, or grown for the production of grain or seed and was processed, the quantity by weight;

(C) if the industrial hemp crop was cultivated, planted, or grown for the production of floral material and was processed, the quantity by weight; and

(D) if the industrial hemp crop was cultivated, planted, or grown for the production of more than one end-use and was processed, the information for each end-use as required by this regulation;

(2) the name, address, and, if applicable, the license number of the primary licensee on the research grower license or an out-of-state individual or business entity that is authorized by an institution of higher education or a state department of agriculture under 7 U.S.C. 5940, as amended, and the laws of the state that cultivated, planted, grew, handled, harvested, conditioned, stored, distributed, or transported any industrial hemp plants, plant parts, or grain that the licensee processed; and

(3) the name, address, and, if applicable, the license number of the primary licensee on the research distributor license or an out-of-state individual or business entity that is authorized by an institution of higher education or a state department of agriculture under 7 U.S.C. 5940, as amended, and the laws of the state that distributed or transported any of industrial hemp plants, plant parts, or grain that the licensee processed.

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Please reference the Kansas Department of Agriculture's Industrial Hemp Research Program's [Rules and Regulations](#)

After completion of the Processing Report form, please attach relevant documentation to support the report as necessary. Examples of supporting documentation may include but are not limited to bill of sale and bill of lading documentation, processing agreements, harvest authorizations, and certificates of analyses.

#### HOW TO SUBMIT REPORT FORMS TO KDA

##### **by email:**

[kda.industrialhemp@ks.gov](mailto:kda.industrialhemp@ks.gov)

Please name the file: KDA license number: Licensee's Name - Grower, Report Type, date submitted (ex. KDA-XXXXXXXXXX: First Name Last Name - Grower Distribution Report DD.MM.YYYY)

Acceptable file types: .pdf, .jpeg; .png

##### **by mail:**

Kansas Department of Agriculture

Industrial Hemp Program

1320 Research Park Drive

Manhattan, KS 66502

Acceptable file types: 9 x 11 in. paper copy

##### **Your Industrial Hemp License Information Online**

<https://portal.kda.ks.gov/>



Department of Agriculture  
 Industrial Hemp Research Program  
 1320 Research Park Drive  
 Manhattan, KS 66502  
[kda.industrialhemp@ks.gov](mailto:kda.industrialhemp@ks.gov)

**Industrial Hemp Processing Report (Processor)**

Primary Licensee's Name: \_\_\_\_\_  
 (as it appears on your license)

\_\_\_\_\_  
 Date Completed  
 (MM/DD/YYYY)

KDA License Number: \_\_\_\_\_  
 (Ex. KDA-XXXXXXXXXX)

**SECTION 1: Receipt Information (Tables 1.1 – 1.3)**

**Table 1.1-** Grower information by entry from which industrial hemp was grown (use additional pages as necessary)

Entry	Grower Name	License No.	Address	City	State	ZIP Code
1						
2						
3						
4						
5						
6						
7						
8						

**Table 1.2-** Transportation information by entry from which industrial hemp was transported received (use additional pages as necessary)

Entry	Distributor Name <sup>z</sup>	License No.	Address	City	State	ZIP Code
1						
2						
3						
4						
5						
6						
7						
8						

<sup>z</sup>If transported by a grower, provide grower information for each applicable entry. If self-transported, indicate "self-transported".

**Table 1.3-** Amounts received by entry (for each entry complete values for all industrial hemp received from a grower or distributor; use additional pages as necessary)

Entry	Product <sup>z</sup>					
	Seed (lbs)	Grain (lbs)	Floral (lbs)	Fiber		
				lbs	No. Bales	Bale Type
1						
2						
3						
4						
5						
6						
7						
8						
<b>Total</b>						

<sup>z</sup>Information should be consistent with each grower and distributor entry as indicated in Tables 1.1 and 1.2



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**SECTION 2: Processing Information (Tables 2.1 -2.2)**

**Table 2.1-** Processing activity by entry (complete amounts processed for each entry, as indicated in Tables 1.1 - 1.3; use additional pages as necessary)

Entry	Processing Activity <sup>2</sup>						Start Date	End Date
	Seed (lbs)	Grain (lbs)	Floral (lbs)	Fiber				
				lbs	No. Bales	Bale Type		
1								
2								
3								
4								
5								
6								
7								
8								
<b>Total</b>								

<sup>2</sup>Information should be consistent with each grower and distributor entry as indicated in Tables 1.1, 1.2, and 1.3

**Table 2.2-** Unprocessed industrial hemp (complete amounts of unprocessed for each entry, as indicated in Tables 1.1 - 1.3; use additional pages as necessary)

Entry	Unprocessed Hemp					
	Seed (lbs)	Grain (lbs)	Floral (lbs)	Fiber		
				lbs	No. Bales	Bale Type
1						
2						
3						
4						
5						
6						
7						
8						
<b>Total</b>						

Attachment 1: \_\_\_\_\_ Attachment 2: \_\_\_\_\_  
 Attachment 3: \_\_\_\_\_ Attachment 4: \_\_\_\_\_  
 Attachment 5: \_\_\_\_\_ Attachment 6: \_\_\_\_\_  
 Attachment 7: \_\_\_\_\_ Attachment 8: \_\_\_\_\_

(Identify and attach relevant bill of sale and bill of lading documentation, processing agreements, certificates of analyses, and harvest authorizations for sold loads of industrial hemp)

\_\_\_\_\_  
 Primary Licensee's Signature

\_\_\_\_\_  
 Date