Kansas Department of Agriculture

1320 Research Park Dr., Manhattan, KS 66502

REQUEST FOR CERTIFICATE OF FREE SALE

(For legible purposes, please do not hand write on this form, type is preferred)

Business licensed through: ACAP (Feed) Dai		Dairy	iry Meat and Poultry		Food Safety	
Business name: (The licensed establishme	nt where products are manufactu	red) Email:				
Phone:		Fax:				
Business address (Kansas only):		City:		State:	Zip:	
Person submitting request:		Phone:		I		
Address:		City:		State:	Zip:	
Business headquarters address (h	different from Kansas addre			Otato.	Σ.φ.	
Country of destination:		Date cer	Date certificate needed:			
Brand name of product shipped:		Type of	Type of product: (i.e. "a food ingredient")		Product Label	
Return mail method (provide one)*:						
First Class USPS Mail (no charge	e)					
Completed Express label	Carrier:	Carrier: Ac			count Number:	
Delivery address (if different than	Kansas business address):	City:		State:	Zip:	
* Certificates are mailed back USPS to	business address prov	/ided above unle	ss otherwise r	noted.		
If you need to send additional informa	ntion, please email appro	opriate contact b	elow.			
Complete separate form for each certifice NOTEA \$20.00 fee will be charged for All fees are billed to the requesting but	r each certificate reques	sted. An addition	nal \$1.00 fee w	vill be charged	for each duplicate.	
Please fa	c or email form to	the appropri	ate contac	t below.		
ACAP (Feed)	Dairy / Meat and Poultry			Food Safety		
Judy Liu	Krista Moore			Lisa Tillotson		
Judy.Liu@ks.gov	Krista.Moore@ks.g			Lisa.Tillotson		
(PH) 785-564-6686 (Fax) 785-564-6779	(PH) 785-564-67 (Fax) 785-564-67			(PH) 785-56 (Fax) 785-56		

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