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| PCN 519 | **PCN Self-Sanitation Tracking Sheet** | | | | | |  |
| Indicate Quarter | | 🞏 Qtr. 1 January –March | 🞏 Qtr. 2: April-June | | 🞏 Qtr. 3: July-September | 🞏 Qtr.4: October- December | |
| Farm Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Operator/Cooperator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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| **Date and Time** | **Type Equipment Description**  (Tractor, plow, cultivator…) | **Equipment Identification**  (Make and Model, Serial number, Tractor/truck number, license plate number…) | **Qty** | **Location** (Moved From) | **Destination** (Moved To) | **Cleaned by** (Name) | **Name of certifying individual** |
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