



Commercial Vendor Annual Sales Report

Vendor Name_____

Certified Vendor Name_____

PVL Number_____

CPVL Number_____

Pesticide Name	PCP Act Reg. #	Sold To	PAL/POL #	Size and Type of Unit	Date Sold	Quantity Sold

☐ I hereby certify that the information provided in this application is accurate, to the best of my knowledge.

Signature_____

Date_____