



**Peace Region Forage Seed Levy
REQUEST FOR REFUND**

According to the Regulations, requests for refunds must be received at the Levy Administration office prior to the end of January for Levy deducted during the previous calendar year. Refunds will be issued prior to mid-March.

Producers Name _____

Mailing Address _____

City _____ **Province** _____ **Postal Code** _____

Phone (____) _____ **Fax** (____) _____

Crop Type	Crop Class	Dealer Seed Was Sold To	Date of Sale	Total Kgs Sold	Levy Amount Deducted

Total Levy Deducted \$ _____

Voluntary Contribution \$ _____

Total Levy Refund Requested \$ _____

Signature _____ **Date** _____

Please send your refund application to: Peace Region Forage Seed Levy Administration Office
 PO Box 39 Bezanson, AB T0H 0G0
 Phone: (780)539-1495 Fax: (780) 539-1430
 Email: rick@mfcacorp.ca or levy@peaceforageseed.ca