



OFFICE OF THE STATE FIRE MARSHAL

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HEMP MATERIAL CHAIN OF CUSTODY TRACKING FORM

License Holder:		Processor License #:	
Starting Location:		Date:	Seal #:
Ending Location:		Date:	Seal #: (Verify same above)
Driver# 1 Name:		Signature:	
Driver#2 Name: (If Applicable)		Signature: (If Applicable)	

Description of MATERIAL		
Item #	Quantity	Description of Material

Chain of Custody				
Item #	Date / Time	Released by (Signature & ID#)	Received by (Signature & ID#)	Comments/Location

HEMP CHAIN-OF-CUSTODY TRACKING FORM (Continued)

Chain of Custody				
Item #	Date / Time	Released by (Signature & ID#)	Received by (Signature & ID#)	Comments/Location

Final Disposal Authority if Applicable
<p>Authorization for Disposal</p> <p>Item(s) #: _____ on this document is (are) no longer needed, and is/are authorized for disposal by (check appropriate disposal method)</p> <p><input type="checkbox"/> Destroy</p> <p>Name Authorizing Representative: _____</p> <p>Signature: _____ Date: _____</p>
<p style="text-align: center;">Destruction of Material</p> <p><input type="checkbox"/> Item(s) #: _____ on this document were destroyed by the Custodian</p> <p>Name: _____ Signature: _____</p> <p>Date: _____</p>
<p>This Hemp Chain-of-Custody form is to be retained as a record by each party.</p>