

# **ACFM Weekly Report Form**

(please complete one copy of this form for each market you attend)

Name \_\_\_\_\_ Date \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**Please list below the items you have brought to sell today at the Allen County Farmers' Market:**

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**Please list here the items you expect to bring next week to the Allen County Farmers' Market: (these will be advertised in our outlets)**

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**I agree to follow the rules and regulations governing the Allen County Farmers' Market at the local, regional, state and federal levels.**

**Vendor Signature:** \_\_\_\_\_

**Market Management:** \_\_\_\_\_