## Common Milkweed Seed Request Form



1) General Proj	ect Information					
Project Name			Requested By			
Address/City			State/Zip			
Project Location	County:	Lat/Long:	Project Contact			
Is this project for: Environmental						
Other	Conservation Reserve Program	Wetland Quali Reserve Incen Program Progr	tives For Wile	dlife Stewardship		
Have you received assistance from:						
ОРНІ:	ODNR:	NRCS: USFWS-PF	W: PF/	QF: NWTF:		
Acres of Milkweed Seed Requested			Date Submitted	Requested Receive Date:		

To be completed by OPHI Steering Committee						
Request Status		Review Date		Assigned Partner		
Comments						

2) Stakeholder Information (Optional)					
Organization	Contact How will the organization benefit from this request?				

## 3) Project Scope

Project Description:			

While these seeds are free we ask that you <u>please consider donating to a small amount</u> to cover the cost of shipping and regular costs associated with the seed cleaning process.

Please us this address if you wish to send this application and/or a donation by mail:

Ohio Pollinator Habitat Initiative c/o Ella George P.O. Box 8. Monroe Falls, OH 44262

Email contact: ohiopollinator@gmail.com