**Seed Order Form**   
**ENTER NAME OF NON-BEND CLEANING FACILITY HERE**  
*Save forms with the title* Year\_CleaningFacility\_SeedOrder\_YourName\_RequestDate.

*example: 2025\_Dorena\_SeedOrder\_SarahHill\_20250602*

Please send completed forms to [sehill@blm.gov](mailto:sehill@blm.gov).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Requestor Information** | | **Receiver Information** | **Shipping Information** | |
| DATE ORDERED: | | DATE NEEDED: | \*Fedex Account number: N/A | |
| NAME: | | NAME: | \*Currently requestor will not pay for shipping. This could change in the future, check in with your agency coordinator to confirm | |
| EMAIL: | | EMAIL: |  | |
| PHONE: | | PHONE: |  | |
| AGENCY/UNIT NAME: | | ADDRESS: |  | |
| **Please describe in detail how returned seed will be used, i.e. common garden study, restoration project, academic partnership, etc:** | | | | |
|  | **Species** | **Seed Collection Reference Number** | **Pounds to Ship** | **Comments** |
| *ex* | *Poa secunda* | *NV030-23* | *.08* |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| \*Seed orders must be in pounds | | | | |
| Need help filling out this form? Please contact SOS National Curator Sarah Hill at sehill@blm.gov | | | | |