DESTRUCTION OF RETURNED FORMULA LOG

DATE	NAME OF PARTICIPANT OR STATE ID#	FORMULA NAME	Pwdr/Conc/RTU AMT. RETURNED		STAFF INITIALS
	Name:	Formula:	Pwdr Conc RTU		
	State ID#:		Amt:		
	Name:	Formula:	Pwdr Conc RTU		
	State ID#:		Amt:		
	Name:	Formula:	Pwdr Conc RTU		
	State ID#:		Amt:		
	Name:	Formula:	Pwdr Conc RTU		
	State ID#:		Amt:		
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	State ID#:		Amt:		
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	State ID#:		Amt:		
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	State ID#:		Amt:		
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	State ID#:		Amt:		
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	State ID#:		Amt:		
	Name:	Formula:	Pwdr Conc RTU		
	State ID#:		Amt:		
	Name:	Formula:	Pwdr Conc RTU		
	State ID#:		Amt:		