Attach canceled check to upper left corner
across the top of the FACE of this statement

Form 1

N. Y. S. Dept. Agriculture & Markets
Albany, N.Y. 12226

PREMIUM STATEMENT FORM

Premium Statement Form and Chenango County Fair Entry Form

P.O. Box 622 - Norwich, N.Y. 13815

Exhibitor _____

Address _____

City/Town _____

County _____

Please read Rules Book before filling out Entry Form

TYPE OR PRINT CLEARLY

Youth _____
Open _____

Do not combine youth and open class entries

Premiums awarded and paid by check No. _____
Canceled check to be forwarded as part of report.

Dept.	Section	Class	CLASS DESCRIPTION	For Office Use		
				Award	Amount	

Entry fee $ _____
Ex. Fees $ _____
Misc. $ _____
Total $ _____

TOTAL

THREE COPIES OF THIS FORM MUST BE SUBMITTED