

ENTRY FEE CERTIFICATION FORM

Year _____

NOTE: SUBMIT 2 PREMIUM BOOKS AND ORIGINAL OF THIS COMPLETED FORM 10 DAYS PRIOR TO YOUR FAIR TO:

**IL DEPT. OF AGRICULTURE
C/O COUNTY FAIR OFFICE
P.O. BOX 19281
SPRINGFIELD, IL 62794-9281**

(PENALTIES WILL BE ASSESSED IF MATERIAL IS LATE.)

We, the President, Secretary and Treasurer of the _____ County

Fair in _____, Illinois, do hereby certify that all entry fees for all eligible departments are listed in our premium book and are in compliance with Section 260.40 of CHAPTER I: DEPARTMENT OF AGRICULTURE, PART 260: FAIRS OPERATING UNDER THE AGRICULTURAL FAIR ACT for our 20____ fair.

Signature: _____ President

Signature: _____ Secretary

Signature: _____ Treasurer

DATE: _____

MAINTAIN A COPY FOR YOUR FILES.

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