

*Post in obvious location next to pool
or other treated location*

Product Used: _____
(do not forget to attach the label)

DATE	AMOUNT USED	APPLICATOR'S NAME/PHONE NUMBER

**THIS POSTING IS RE-USEABLE!
WITH EACH NEW APPLICATION SIMPLY FILL IN THE NEXT ROW WITH
THE CURRENT DATE OF TREATMENT, AMOUNT OF PRODUCT APPLIED
AND THE PHONE NUMBER OF THE PERSON WHO APPLIED THE
PRODUCT.**

****YOU MUST ATTACH A COPY OF THE LABEL
OF THE PRODUCT BEING USED!**

**PLEASE USE A PERMANENT MARKER AND
CONSIDER PROTECTING THIS POSTING FROM THE ELEMENTS
BY PUTTING IT A CLEAR PLASTIC BAG.**