



**YOLO COUNTY DEPARTMENT OF AGRICULTURE AND WEIGHTS & MEASURES**

**Quarterly Employment Report**

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*Please provide the Yolo County Department of Agriculture a list of all employees, employed at any time during the quarter. Reports are due by the 15th of the month following the end of each quarter (March, June, September, and December).*

Name: SSN / TIN: Phone: Address:	Name: SSN / TIN: Phone: Address:
Name: SSN / TIN: Phone: Address:	Name: SSN / TIN: Phone: Address:
Name: SSN / TIN: Phone: Address:	Name: SSN / TIN: Phone: Address:
Name: SSN / TIN: Phone: Address:	Name: SSN / TIN: Phone: Address:
Name: SSN / TIN: Phone: Address:	Name: SSN / TIN: Phone: Address:

Permit Holder:	Business Name:
Your Name:	Business Address:
Signature:	Business Phone:
Date:	Business SEIN:

***If more space is needed, please use an additional form. Forms may be submitted via mail to:  
Yolo County Child Support Services, PO Box 1385, Woodland, CA 95776; OR by e-mail to:  
cannabis.compliance@yolocounty.org. If you have questions or need assistance, please call 530-666-8140.***