



**Texas Department of Agriculture**  
**GRAIN CLAIM FORM**

**RGW-359**

COMMISSIONER SID MILLER

<b>SECTION A</b>	<b><sup>1</sup> CLAIM INFORMATION</b>				
	I claim that I have legal right to the commodity listed below:				
	Quantity	Unit of measure <input type="checkbox"/> pounds <input type="checkbox"/> bushels <input type="checkbox"/> CWT		Commodity	
	Stored at the facility listed below:				
	<b><sup>2</sup> FACILITY INFORMATION</b>				
	Facility Name				
<b><sup>2</sup> PHYSICAL ADDRESS OF LOCATION</b>					
Address (No P.O. Box)					
City		State	Zip	County	

**NOTE:** You may only claim grain to which you personally have a legal right. You may not claim on behalf of another person unless you have attached a signed, written authorization by such a person authorizing you to act on that person's behalf.

Your claim must be supported by warehouse receipts, scale weight tickets, etc., and any necessary explanation of the documents of the nature of the claim, attached to this form. You must submit a separate form for each type of commodity.

If claiming for others, please indicate the name and phone number of each person(s) under the comment section at the bottom of this form and attach their signed, written authorization(s).

<b>SECTION B</b>	<b><sup>1</sup> CLAIMANT'S INFORMATION</b>				
	First Name	M.I.	Last Name		
	Mailing Address				
	City	State	Zip	Telephone Number - -	

<b>SEC C</b>	<b><sup>1</sup> COMMENTS</b>

<b>SEC D</b>	<b><sup>2</sup> SIGNATURES</b>
	Date / /                      Signature