



Owatonna Public Library

Seed Donation Form

Please complete the information below and include this form with your seed bag. One form per seed variety.

Plant Name: _____

Variety: _____

(Example - Plant Name: Kale Variety: Lacinato)

Type (circle one): Flower Herb Vegetable Other_____

Seed Source Location: _____

Month/Year Harvested: _____

Additional Notes: (Collected from one plant? Multiple? Growing tips etc.) _____

Contact Information

Name: _____

Email: _____

Phone: _____

Thank you for your donation!