



4. Did you have to control weeds in your **Herbs** projects?  Yes  No  
 If you answered YES, what methods did you use? (Check all methods used)

Pulled the weeds by hand

Tillage (specify):  Hoe  Mechanical tiller  Other (specify): \_\_\_\_\_

Herbicide (specify products used):

Product	How Applied	Date Applied

5. Did you have to fertilize your **Herbs** projects?  Yes  No  
 If you answered YES, what fertilizer did you use?

Product	Analysis (example: 10-20-10)	How Applied	Date Applied

6. Did you have any insect problems in your **Herbs** projects?  Yes  No  
 If you answered YES, specify details below?

What insects	Treatment	How Applied	Date Applied

7. Did you have any disease or other problems in your **Herbs** projects?  Yes  No  
 If you answered YES, specify details below?

Problem	How Applied	Date Applied