

Munsell's Poultry Processing

Customer Form – Antibiotic, Vaccination & Humane Handling

Customer Name: _____

ANTIBIOTIC'S

Please read the following and initial next to the line that applies to this lot.

If it is determined that if this lot is in violation of the above antibiotic rule by signing below the customer agrees to pay for all necessary expenses.

_____ I have not fed antibiotics to this lot.

_____ I fed antibiotics to this lot, but I followed all feed withdrawal procedures

_____ I fed antibiotics to this lot and did not follow proper feed withdrawal procedures.

VACCINATION'S

Please read the following and initial next to the line that applies to this lot.

If it is determined that if this lot is in violation of the above vaccination rule by signing below the customer understands all measures that may take place, such as trimming or condemning the lot and/or individual bird.

_____ I have not vaccinated this lot.

_____ I did vaccinate this lot.

HUMANE HANDLING

Is there evidence of the following? Yes or No

_____ Bleeding If yes, where from? _____

_____ Wounds If yes, where from? _____

_____ Blisters If yes, where from? _____

_____ Allergies

_____ Filth

_____ Unable to stand/walk

Customer Signature

Date