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| **Veterinary Prescription for Feed Request**(Please provide complete applicable information) |
|  |  |
| **Date** |  |

|  |  |  |
| --- | --- | --- |
| **Producer** | **Owner** | **Feed Mill** |
|  |  |  |
| **Phone** |  | **Phone** |  | **Phone** |  |
| **Email** |  | **Email** |  | **Email** |  |
| **Fax** |  | **Fax** |  | **Fax** |  |
| **□ Rush Service (3 business days – an additional fee applies)**  | **□** **Regular Service (5 business days)** |

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| **Flock Information** (all information is required please) |
| **Species** |  | **Approximate Place Date** |  |
| **Age** |  | **Approximate Ship Date** |  |
| **Barn** |  | **# Birds** |  |
| **Flock ID** |  | **Weight** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Code | **Ration / Age** | **Est. Amt****(tons)** | **Active Ingredient** | **Level of Active Ingredient** |
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