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Over Placement Notification

Date Notified: _____

Producer Name: _____

Flock #: _____

Placement Date: _____

Total Females Allocated : _____

Total Actual Females Placed: _____

(Including Extras)

of Excess Birds: _____

Calculation of Early Placement Debit:

Next Placement Date: _____

Hatchery Acknowledgement: Yes ___ No ___

AHEP Board Signature: _____

Date: _____

Producer Options (choose one)

___ Please deduct debit over ___ (#) placements

___ I will acquire lease for the debit amount

___ I will cull the excess number of birds prior to transfer

Producer Signature _____ Date _____ Fax to office by: _____