

Supplement - Multiple Plants Screening Table

*******SAMPLE*******

Note: This supplement is required for all operations answering "YES" to Question 1 in Section 1 of the Annual validation.

1. Please list all plants affiliated with this firm that produce any dairy products:

Interviewer Note: List Plant Name, Address, Telephone, and Dairy Products Produced for all company locations.

Office Use			Plant Name	Location	Telephone Number	Products Produced	Answer Codes		
ST ID	PLANT ID	PP					Question 2	Question 3	Question 4
					() _____				
					() _____				
					() _____				
					() _____				
					() _____				
					() _____				
					() _____				

2. Does this firm have full access to all weekly sales data for (insert Plant Name of each entry) reported above (i.e. all ledgers, contracts, invoices, and cash receipts)?*[If no or DNK, skip Questions 3 & 4.]*

1 = YES 3 = NO 7 = DNK

3. Does (insert Plant Name of each entry) produce and/or market products outside of the information your firm provides to AMS (i.e. cheese is reported through your firm but the plant makes and sells dry whey)?

1 = YES 3 = NO 7 = DNK

4. Does (insert Plant Name of each entry) market products of the same type outside of the information provided by your firm to AMS (i.e. the plant has walk-in cash sales)?

1 = YES 3 = NO 7 = DNK

[After plants have been completed of the supplement return to the Annual Validation Worksheet in Section 1, Question 2.]

