

NEW

WEEKLY HATCHERY REPORT Week Ending Saturday _____



Arkansas Field Office

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Under Title 7 of the U.S. Code and CIPSEA (Public Law 107-347), facts about your operation are kept **confidential** and used only for statistical purposes. Response is **voluntary**.

Please fax to the number above or report electronically. If you have any questions, please call our office at 1-800-327-2970 Thank you for your cooperation.

Please make corrections to name, address and ZIP Code, if necessary.

CHICK OPERATIONS

(Please report "0" if answer is none.)

		Broiler-Type Number	Egg-Type Number							
1.	Chicken Eggs set in your incubators during the week? (Include: Custom set for others. Breeding flock replacements.		_							
	All eggs originally set in incubators with the intended purpose of hatching. Do not subtract eggs removed prior to hatching.)	111	101							
2.	Chicks Hatched in your incubators during the week? (Include: Custom hatch for others. Breeding flock replacements.)	112	102							
3.	3. Of the chicks hatched last week, how many were:									
	a.Placed for meat production?	113								
	b. Placed as:									
	(i) Straight-run chicks?		104							
	(ii) Pullet chicks?	115	105							
	(iii) Cockerel chicks? (Include any given away.)	116	106							
	c.Other disposition? (Research, destroyed, etc.)	117	107							
	d. TOTAL ? [Question 3a + 3b + 3c] (Total should equal Question 2: Chicks Hatched.)	118	108							
4.	Of the broiler chicks placed for meat production, how many were:		Broiler-Type Number							
	a. Placed within Arkansas ?		141							
	b. Placed in other states:									
	<u>162</u>		142							
	<u>163</u>		143							
	164		144							
	165		145							
	166		146							
	<u>167</u>									
	<u>168</u>		148							

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		OFFICE USE							
Comments:									
_									
Respondent Name:		Phone: (_)			Date:			
						9910	MM	DD	YY
would you father have a bir	er summary maneu to you	i at a later date: 1 1 cs 3							
		Its of this survey on the release 1 at a later date? $_{1}$ Yes $_{3}$						099	
171							151		
170							150		
169									
160							149		

OFFICE USE											
Response		Respondent		Mode		R Unit	Enum.	Eval.	Office Use for PO		e for POID
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-Mail 2-Tel 3-Face-to-Face 4-CATI 5-Web 6-e-mail	9903	0921	098	100	789		
7-Off Hold – Est 8-Known Zero				7-Fax 8-CAPI 19-Other					407		408
S/E Name		•		•	•		•		•		•

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0535-0004. The time required to complete this information collection is estimated to average 12 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.