U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE LIVESTOCK AND POULTRY PROGRAM		1. NAME AND ADDRESS OF WORK LOCATION (Include Zip Code)			2 (a). Sch	eduled Plant No.	2 (b). Unscheduled Request No.	OMB APPROVED: NO. 0581-0128  Page of		
	ULTRY DLUME REPORT				3. REPORTING PERIOD  Daily Weekly Billing Period			4. From 5. To		
ACCEPTANCE SERVICE VOLUME										
6. KIND	7. CLASS	8. TYPE	9. STYLE	10. ACCEPTANCE SEI CODE	RVICE	11. EXPORT COUNTRY CODE	12. GRADED	13. CONSUMER LABELED	14. LBS ACCEPTED	15. LBS RETAINED
				CERTIFICATIO	N STATE	MENTS				
	I certify that	the volumes of prod	ducts processed as stat	ed above, are correct	to the bes	t of my knowledge an	d the product officially identifi	ed as marked.		
				Signature	of Grader					
According to the Paperv information collection is	work Reduction Act of 1995, at s 0581-0128. The time required	n agency may not cond I to complete this infor	uct or sponsor, and a persmation collection is estim	on is not required to respated to average 45 minutes	ond to a col	lection of information us	nless it displays a valid OMB contr for reviewing instructions, searchin	ol number. The valid	OMB control num es, gathering and m	ber for this aintaining the

data needed, and completing and reviewing the collection of information.

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