This report is re-	is report is requested by certain States for the interstate shipment of poultry products.  See reverse side for OMB information																OMB Approved																	
	it or p	ouit	ry pr	oauc	ıs.				See	reve	rse si	de for	ОМВ	infor	matio	n						0579-0007												
REPORT NUMBER  1. DATE OF SHIPMENT									UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE NATIONAL POULTRY IMPROVEMENT PLAN																_									
REPORT								RT OF SALES OF HATCHING EGGS, CHICKS, AND POULTS															(	T	$I^{\gamma}$									
2. NAME, PHYSICAL ADDRESS, AND PHONE NUMBER OF										RCH	IASE	:K																		<b>*</b>	4_			
3. NAME, PHY	PR	ODL	ICEF	ROF	SH	IPPI	ER														7	(F		NPIP										
4. NAME, PHY	NAME, PHYSICAL ADDRESS, AND PHONE NUMBER OF DESTINATION OF EGGS, CHICKS, AND/OR POULTS  7. PRODUCT 8.SEX 9.TYPE (INTENDED USE) 10. CLASSIFICATION – U.															NATION	AL POUL	TRY IMPE	SOVEMENT PLAN															
5. QUANTITY	6. VARIETY, STRAINS, OR TRADE NAME	7	7. PF	ROD	UCT	Γ	8	8.SEX			9.7	ΓΥΡΙ	E (/N	ITEN	IDEL	D US	SE)		10. CLASSIFICATION – U.S.															
		Chicken Eggs	Turkey Eggs				·			Commercial Production Stock			Multiplier Breeding Stock			В	Primary Breeding Stock			ticum	0	dis	si	si			enza			red	red	OTHER (Specify)		
				Turkey Egg	Turkey Egg	Turkey Egg	Chicks	Poults	Other	Straight-run	Females	Males	Eggs	Meat	Other	Eggs	Meat	Other	Eggs	Meat	Other	Pullorum Typhoid Clean	M. Gallisep Clean	M. Synoviae Clean	M. Meleagridis Clean	S. Enteritidis Monitored	S. Enteritid	Salmonella	Sanitation Monitored	Avian Influenz Clean	H5/H7 AI Monitored	H5/H7 AI Clean	M.G Monitored	M.S. Monitored
11. REMARKS	S (Services perfo	orme	ed OI	n pro	odu	cts i	n shi	ipme	ent, e	e.g.,	vac	cına	tion,	, bea	ak tri	ımm	ııng,	duk	gnıac	, etc	., bu	not	nece	ssari	ıy ce	rtifie	a by	State	insp	ecto	r)			
This is to certify that the above name producer or shipper is participating in the National Poultry Improvement Plan									12.	SIGI	TAN	URE	OF	STA	ATE I	INSI	PEC	TOR	1											13. DATE				

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 0579-0007. The time required to complete this information collection is estimated to average .25 hours 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.

VS FORM 9-3 (Reverse)

	This report is requested by certain States for the interstate shipment of Failure to report may result in non-acceptance of shipment.																See	reve	rse s	ide fo	r OM	B inf	orma	tion	1						OMB Approved 0579-0007				
3. NAME, PH		SS, A	AND	PHO	ONE	NUI	MBE MBE	R OI	F PU	SA IRCH	ANI ALI IAS	MAL NA ES ER	OF	D P NAL F <b>H</b>	PER	T HE	EALTRY II	TH II	NSPI ROVE	ECTI EMEI	ON S	AN HIC	VICE		AN	D P	POU	<u>ILT:</u>	<u>s</u>	NATION IN COLUMN 1		LITRY IMP	NP		
	7. PRODUCT 8.SEX 9.TYPE (INTENDED USE) 10. CLASSIFICATION															<u></u>																			
5. QUANTITY	6. VARIETY, STRAINS, OR TRADE NAME									Pro	Commercial Production Stock		M B	Multiplier Breeding Stock			Primary Breeding Stock			epticum	age .	idis	يا								ored	ored	OTH (Spe		
		Chicken Eggs	Turkey Eggs	Chicks	Poults	Other	Straight-run	Females	Males	Eggs	Meat	Other	Eggs	Meat	Other	Eggs	Meat	Other		M. Gallisepticum	M. Synovia	Clean M. Meleagr	Clean	Monitored	S. Enteritic Clean	Salmonell	Sanitation	Avian Influ	H5/H7 AI Monitored	H5/H7 AI Clean	M.G Monitored	M.S. Monitored			
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11. REMARK	S (Services perf	orme	∍d o	n pr	odu	cts i	n sh	ipm	ent,	e.g.,	vac	cina	ation	, be	ak tr	rimn	ning	, du	bbin	g, et	c., bı	it no	ot ne	ces	sari	ly ce	rtifie	d by	State	: Insp	secto	or)			
	This is to certify that the above named producer or shipper is participating in the National Poultry Improvement Plan.											URE	E OF	ST	ATE	INS	PEC	TOF	₹												13. DATE				
This is to certify that the description and classification of										SIG	NAT	URE	E OF	ST	ATE	INS	PEC	ТОЕ	₹												1	5. DA	TE		

This is to certify that the description and classification of the products listed above are properly indicated.

## UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES NATIONAL POLITORY IMPROVEMENT PLAN

## INSTRUCTIONS FOR USE OF VS FORM 9-3 REPORT OF SALES OF HATCHING EGGS, CHICKS, AND POULTS

This form is designed to cover certain sales made by National Plan hatcheries, dealers, and independent flock owners. Some States require this form to be used for some or all shipments coming into the State. Some foreign countries and/or importing purchasers may require this form.

This form will only be furnished to participants in the National Poultry Improvement Plan.

Items 1 through 11 of the report should be completed by the producer or shipper. The first (*white*) and last (*yellow*) copies should be removed for distribution indicated, and the two remaining copies should be sent promptly to the producer or shipper's Official State Agency for verification of checked classifications, counter signature, and proper distribution.

Item No.

- 1-4. Self-explanatory
- 5. Indicated number (not cases, boxes, or dozens) of each kind of product
- 6. Use a separate line to identify each product by variety, strain, or trade name
- 7. Product Describe each product by inserting an "X" in one of the 5 columns
- 8. Sex Insert an "X" in one of the 3 columns, except for eggs
- 9. Type-Insert an "X" in one of the 3 columns as follows:

Commercial Production Stock - Products (eggs or baby poultry) not intended to be used for breeding purposes

Multiplier Breeding Stock - Breeding stock whose progeny will be used for commercial egg or meat production or exhibition purposes and not intended for further reproduction

Primary Breeding Stock - Breeding stock whose progeny will be used for further reproduction

- 10. Classification Insert an "X" in the column for each National Poultry Improvement Plan classification for which the product is qualified
- 11. Self-explanatory
- 12-13. Signature of State Inspector and Date May be signed prior to form being sent to participant
- 14-15. Signature of State Inspector and Date Should not be signed until classifications checked by participant are verified by State Inspector

VS FORM 9-3 FEB 2016