

PRODUCER CHEQUE REQUISITION

PAYABLE TO: _____

FARM NAME: _____

CDC #: _____

MAILING ADDRESS: _____

PRODUCER SIGNATURE: _____

PLEASE ATTACH A COPY OF THE COMPLETED BIOSECURITY ASSESMENT WITH YOUR CHEQUE REQUISITION SUBMISSION

AMOUNT: \$200.00
(OFFICE USE ONLY)

APPROVED BY: _____
(OFFICE USE ONLY)