



Nutrition Plan

Operation Name: _____

Site Name(s): _____

Diet Formulation/ID(s): _____

A qualified herd nutritionist must sign below that the following statements for the specified producer, sites, and diet formulations are true:

- The diet noted above has been developed in accordance with the guidelines provided by the most recently published National Research Council (NRC) standards and reviewed annually.
- There must be documentation that pharmaceutical growth promoters are not used as additives to the feed (such as a letter from the livestock nutritionist/other qualified individual).
- In-feed antibiotic agents are not used as growth additives to the feed in the stated formulation for the stated producer (except ionophores and coccidiostats), except for therapeutic reasons.

Herd Nutritionist: _____

Signature: _____ Date: _____