Livestock Input Inventory

Year _____ **Name_____**

List all feed supplements and additives, feed inoculants, health care products, teat dips, dehorning products, and pest control products. If you have completed this form before, only list inputs that are new this year. Have all purchase records for inputs available at inspection. If an input has not been previously approved for use by MOSA, complete ingredient information must be provided.

Office Use Only	Product (complete name)	Manufacturer (include contact information if this is a new product)	Purpose for Use	✓ if currently used	✓ if proposed for use	✓ if OMRI listed	✓ if ingredients info enclosed

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