

Remittance Form

Processor: _____
Producer: _____
Farm Name: _____
Flock Number: _____
Placement Date: _____
Date of Kill: _____
Shipping Receipt #s: _____

Category (One per Sheet)

Broiler: _____ Tom: _____
Hen: _____ Matures: _____

Turkeys Marketed

	No. Head	Live Weight (KGS)
Total Marketed:	_____	_____
Less Whole Bird Condemned:	_____	_____
Less Parts Condemned:		_____
Net Paid:	_____	_____
A Grade:	_____ % @ _____ /KG	
Undergrades:	_____ % @ _____ /KG	

Ontario Licence Fee: @ \$0.015 = _____
Generic Levy: @ \$0.0025 = _____
National Levy: @ \$0.0305 = _____
COVID-19 Emergency Fund
Licence Fee: @ \$0.06 = _____
H.S.T. @ 13% = _____

Total Payable: _____