CONTRACT NUMBER			STATE CONTRACT MONTHLY FEED ESTABLISHMENT REPORT			
	NAME			DATE		
PREPARED BY:	STATE AND AGENCY REPORTING PERIOD				INSTRUCTIONS  Follow detailed instructions on back of this page. Reports are due on the last working day of the following month. Negative reports are required.	
1. INSPECTIONS ACCOMPLISHED		a. TOTAL INSPECTIONS				
		b. ROUTINE INSPECTIONS				
		c. REINSPECTIONS (Follow-ups to violative inspections)				
		d. VISITS (Out-of-Business, etc.)				
2. SAMPLES		a. TOTAL SAMPLES COLLECTED				
		b. NUMBER EXAMINED				
		c. NUMBER OF DETERMINATIONS				
		d. CLASSIFICATION		(1) IN COMPL	(1) IN COMPLIANCE	
				(2) NOT IN CO	(2) NOT IN COMPLIANCE	
3. COMPLIANCE ACTIONS		a. WARNING LETTERS				
		b. EMBARGOES/SEIZURES				
		c. HEARINGS CONDUCTED				
		d. PROSECUTIONS/INJUNCTIONS				
		e. OTHER ACTIONS (Specify type)				
4. HIGHLIGHTS AND PROBLEMS ENCOUNTERED.		On an attached sheet of paper, write a brief narrative detailing any major actions occuring corrections achieved, problems with contract operations, work, etc.				ng,

FORM FDA 2684a (4/02)

PREVIOUS EDITION IS OBSOLETE

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