

"SUPER" MILK Award Nominees

Milk Handler _____ Phone number(____)____-_____

Inspector's name _____ Phone number (____) ____-_____

Mailing Address _____ e-mail _____

<p>Previous winner _____ New winner _____</p> <p>Producer Name _____ Phone (____)____-_____</p> <p><i>(Include producer name for all nominees)</i></p> <p>Preferred Name _____</p> <p><i>(To be used only if nominee prefers to be recognized by this name.)</i></p> <p>Producer address _____ County _____</p> <p>City _____ Zip code _____</p> <p>10/12 11/12 12/12</p> <p>Total months with SCC of 200,000 or less (Please circle)</p>

<p>Previous winner _____ New winner _____</p> <p>Producer Name _____ Phone (____)____-_____</p> <p><i>(Include producer name for all nominees)</i></p> <p>Preferred Name _____</p> <p><i>(To be used only if nominee prefers to be recognized by this name.)</i></p> <p>Producer address _____ County _____</p> <p>City _____ Zip code _____</p> <p>10/12 11/12 12/12</p> <p>Total months with SCC of 200,000 or less (Please circle)</p>

<p>Previous winner _____ New winner _____</p> <p>Producer Name _____ Phone (____)____-_____</p> <p><i>(Include producer name for all nominees)</i></p> <p>Preferred Name _____</p> <p><i>(To be used only if nominee prefers to be recognized by this name.)</i></p> <p>Producer address _____ County _____</p> <p>City _____ Zip code _____</p> <p>10/12 11/12 12/12</p> <p>Total months with SCC of 200,000 or less (Please circle)</p>

**** Deadline March 1 ****