

DHIA West Monthly Report

Month Of: _____

Local Association or IMT Name: _____

NO Changes in Testers, Membership, or Electronic Meter status during the current month

Personnel Changes: Please list any Testers that were either hired or terminated during the past month. Please mail or FAX appropriate Initial Training or Termination forms with requested information, dates, etc. as soon as possible

New Field Technicians or Helpers (circle one)

Name	Date of Employment
_____	_____
_____	_____

Field Technicians Terminating/Retiring

Name	Date of Termination/Retirement
_____	_____
_____	_____

Herd Membership Changes: Please list any **New** herds or herds **Terminating** DHIA affiliation. Please provide appropriate Form 28's and/or signed Membership Agreements via mail or FAX as soon as possible. Please indicate in the box provided an **N** for New or **T** for Terminated.

Herd Name	N or T	Herdcode	Date Started/Terminated	DRPC
_____	[]	_____	_____	_____
_____	[]	_____	_____	_____
_____	[]	_____	_____	_____

Electronic Meter Herds: Please provide Herd Names and Herdcodes for any herds **Starting** or **Quitting** the use of Farm-Owned Electronic Meters for Test-Day purposes. Please indicate in the box provided an **S** for Started or **Q** for Quit.

Herd Name	S or Q	Herdcode	DRPC
_____	[]	_____	_____
_____	[]	_____	_____

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