

Customer Info:

Name: _____

Farm Name: _____

Address: _____

Phone #: _____ Cell #: _____

Email: _____

Dealer: _____ Rep: _____

Sales Rep: _____

Would you like to receive emails from Mapleview Agri Ltd. with information such as new innovative research as well as promotions and deals? Yes No

Type of Producer: Dairy Veal Lamb

Billy Goats Dairy Goats Other: _____

Feeding:

What additives do you top dress in your milk replacer?

Probiotic Antibiotic None Other _____

What type of electrolytes do you give your calves to combat dehydration? _____

Which option best describes your milk feeding?

A. Only feed milk replacer

B. Feed milk replacer when whole milk is unavailable

C. Feeding a mixture of milk replacer with milk

If available, would you be interested in a milk extender to mix with your whole milk? Yes No

If available, would you be interested in a milk replacer specifically designed for the first 2 weeks? Yes No

How long have you been using Mapleview? _____

Which product(s) are you using? _____

How did you hear about us? _____

What agricultural publications do you read/subscribe to?

What makes you choose Mapleview Agri milk replacers?

How do you feel about our in-skid promotions? Is there anything you would like us to keep doing, stop doing, or start doing?

How satisfied are you with your current calf/kid/lamb program?

Very Satisfied

Somewhat satisfied

Could use some improvements

Struggling

Comments &/or suggestions:

Individual results of this survey are for use by Mapleview Agri Ltd. only. All information provided will be kept strictly confidential. Only aggregate results will be distributed.