

**ANR Communication Services
SUBMITTAL FORM (MF-21V)**

INFORMATION

TITLE OF PRODUCTION: _____

AUTHOR(S): _____

TYPE OF PRODUCTION:

Slide tape presentation Speaker support slide presentation
 Scripted video program Documentary video program
 Live teleconference program Other _____

STATUS:

NEW MINOR REVISION OF SLIDE SET/VIDEO TAPE NUMBER _____
 MAJOR REVISION OF SLIDE SET/VIDEO TAPE NUMBER _____

Old stock should be (check one):

Sold until inventory is gone Destroyed after this revision has been produced
 Sent to author Other (please specify) _____

SIGNATURES

(Signatures 1, 2, & 3 **must be completed** at the time of submission.)

(1) If no pesticides are mentioned, author should initial here _____

If pesticides are recommended, the author should send the script with this form to the Statewide Pesticide Coordinator. (The following section should be completed by the statewide pesticide coordinator.)

Pesticide warning to be used:

General Homeowners IPM Rodents
 Livestock Commercial Grower Plants Other _____

CERTIFIED BY THE STATEWIDE PESTICIDE COORDINATOR:

_____ DATE: _____

(2) In preparing or revising this material I followed ANR Communication Services Instructional Program Development Plan (for videos). I now submit this material to be considered for production by ANR (**Author**):

_____ DATE: _____

(3) This material has gone through the ANR peer review process. The author has appropriately responded to comments and suggestions by reviewers. This material meets programmatic acceptance as a ANR-referenced product. (**Associate Editor**):

_____ DATE: _____

(4) I have received this material as approved for production (**Communication Services Production Operations Manager**):

_____ DATE: _____