According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0032. The time required to complete this collection of information is estimated to average .16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the form.

FORM APPROVED OMB NO. 0579-0032 and 0579-0185

STATE				UNITED STATES DEPARTMENT OF AGRICULTURE							ALL INCOMPLETE RECORDS WILL BE RETURNED FOR COMPLETION													
COUNTY				ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES							COOPERATIVE STATE-FEDERAL BRUCELLOSIS ERADICATION PROGRAM BRUCELLOSIS TEST RECORD													
HERD	NUMB	ER	HERD (HERD OWNER LAST FIRST MIDDLE INITI								TAL	PRE TES	EVIOUS T DATE	WET	CODE		TOTAL	REA		SUS			
OWNE	R NUM	BER	ROUTE	-STREET-ROAD										CER	FEDER		□ FE	E BAS	sis 🦳 :	STATE [IVATE		
TEST	PRC	G. WBB	POST	OFFICE	STATE						ZIP CODE					YEE [(fE	EDERA	(L) (COUNTY L	/Ov	wner's Expense		
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Rea			Hd. Cert/ Validation	7.	_	COMPLETE HEI					;	SUMMARY		earta beer	ags hav n retagg	e been jed, and	listed, of when	cattle paym	with exist ent is cla	med at pr	l eartag ogram e	s have not expense in		
Rea Susp Rin		3.	Quar. & Test		_ YE	ALL ELIGIBLE ANIMALS YES NO				-	NEG ATIVE			will b	accordance with agreement number below, no payment has been or will be received from any other source.									
Test			Epidemiolo			KING OF HERD			IN HERD		SUS-			SIGN	SIGNATURE AGREE. CODE							. CODE		
Pvt. Sale	-			10.	_} =	DAIRY BEEF SWINE OTHER (Specify			MIXED y below)			PECT		ROUT	ROUTE, STREET, ROAD DATE BLED						ILED			
REMA			Other (Specify be			LABORATORY					REAC- TOR			POST	POST OFFICE STATE ZIP COD					FIELD TEST DONE BY				
KLIVIAI	NO.				PLACE				DATE						REACTORS TAGGED AND BRAND DATE SIGNATURE									
DATE L	ISTE)			BY	BY								LABORA	ATORY	RESULTS				REMAI	RKS			
TUBE NO.	2			RECORD A IDENTIFICA NUMBER	TION			VACC TATTOC) AGE	BREED	SEX	FL DT	BAPA	CARD	STT	RIV	CF		TEST in terp	ANE ADDITION	O ONAL	REACTOR TAG NUMBER		
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		ed Addition			ttoo(s)		Charac			N - Negatu	ve ' e		- Suspect			d					Tatt	00(s)		