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 0101. The time required to complete this information collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0101

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES

FLOCK INSPECTION AND EPIDEMIOLOGY REPORT FLOCK INSPECTION FOR COMPLETE MONITORED STATUS IN THE SCRAPIE FLOCK CERTIFICATION PROGRAM

				, _ . _ .			
Flock ID		Owner Name and Address	Flock Location if Diffe	Flock Location if Different			
Teleph	none						
Inspector			Inspector ID	nspector ID County			
Inspec	tion Da	ate	Latitude	Latitude Longitude			
Type o	of Flock	t _ Purebred	SHEEP	INVENTORY		GOATS	
		Commercial	<u> </u>	Adult Males			
		_ Feeder _ Other			ult Females		
					arling Males rling Females		
Veterir	nary Pr	actitioner Name			le Lambs/Kids		
				Male/Lambs/Kids Castrated Males			
0		Decidencies est Decid					
Species		Predominant Breed	<u> </u>	Total			
YES	NO	NO INSPECTION CHECKLIST					
	Sheep and goats inspected and found free of clinical signs of scrapie?						
		Sheep and goats inspected and those over 1 year of age are officially identified?					
Discussed procedure for reporting of scrapie suspect animals and the submission of samples?							
		WRITTEN OR COMPUTER RECORDS REVIEWED AND TRACK THE FOLLOWING INFORMATION?					
	Official and Secondary identification Type of official ID						
Progeny Official and Secondary Identification and Sex Date of Birth or Acquisition Flock of Origin for purchased animals							
		Sire and Dams official and secondary identification					
	Source of animals added since last inspection Purchased additions-date, name and address of previous owner, status in SFCP						
		Disposition of removed animals-died-date, cause, any practitioner disgr					
		Purpose, reason, date and buyer name and address for animals which					
		Records of <one-year-old and="" animals="" as="" breeding="" i<="" official="" sheep="" sold="" td=""><td>ID applied.</td><td colspan="4"></td></one-year-old>	ID applied.				
HAVE ANY OF THE FOLLOWING ACTIVITIES OCCURRED OVER THE LAST YEAR.							
		Commingling of sheep with another producers sheep					
		Purchase of ewes from another producer?					
		Purchase of rams from another producer?					
		Use of semen and embryos					
Copy of Flock Inventory Attached							
Comm	ents:						
FLOC	(()\\/\\	ER SIGNATURE	INSPECTOR SIGNATURE				
FLOCE	COVIN	LIN SIGNATURE	INSPECTOR SIGNATURE				