According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0036 and 0579-0093. 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.

OMB APPROVED
0579-0036
0579-0093

This record is required by law (7 U.S.C. 2131-2156). (9 CFR, Subchapter A, Parts 1, 2, and 3). Failure to maintain this record can result in a suspension or revocation of license and/or imprisonment for not more than 1 year, or a fine of not more than $1,000, or both.

UNITED STATES DEPARTMENTOF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

RECORD OF ACQUISITION, DISPOSITION, OR TRANSPORT OF ANIMALS (*Other Than Dogs and Cats*)

☐ SALE ☐ EXCHANGE OR TRANSFER ☐ DONATION

1. INVOICE NUMBER

2. PAGE 1 of

3. DATE OF DISPOSITION

INSTRUCTIONS: Complete applicable items 1 through 13. Original and one copy to accompany animals. When delivery is made – Items 14 through 20 must be completed by Buyer (Receiver) and copy one returned to Dealer (Seller or Donor). Copy two to be retained Dealer (Seller or Donor). Attach Continuation Sheet (APHIS Form 7020A) as needed.

4. DEALER'S LICENSE NUMBER

5. SELLER OR DONOR *(Name and Address, include ZIP Code)*

6. BUYER OR RECEIVER *(Name and Address, include ZIP Code)*

7. USDA LICENSE NUMBER *(If any)*

8. IDENTIFICATION OF ANIMALS BEING DELIVERED

A. CONTAINER TAG NUMBER, CRATE, OR PEN NUMBER	B. NUMBER ANIMALS	C. PREVIOUS INVOICE NUMBER *(if any)*	D. INDIVIDUAL IDENT., TATTOOS, TAG NUMBERS *(if applicable)*	E. SPECIES	AGE - SEX F. NUMBER YOUNG		G. NUMBER ADULT		H. EST. WEIGHT *(lbs.)*	I. REMARKS *(Condition, etc.)*	RECEIVER'S USE J.	K.
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				
					M	F	M	F				

DELIVERY BY COMMERCIAL CARRIER

9. DELIVERY BY *("X" one)*
☐ Buyer's Truck ☐ Dealer's Truck (*Seller or Donor*)

10. TRUCK LICENSE NUMBER

11. BILL OF LADING NUMBER

12. NAME AND ADDRESS OF COMPANY OR FIRM *(Include ZIP Code)*

13. NAME AND ADDRESS OF TRUCK DRIVER *(Include ZIP Code)*

DELIVERY RECEIPT – TO BE COMPLETED BY BUYER OR RECEIVER

14. ANIMALS DELIVERED WERE *("X" one)*
☐ IN APPARENT GOOD CONDITION ☐ POOR CONDITION ☐ REJECTED *(Attach explanation for rejection)*

15. TOTAL NUMBER RECEIVED

16. NUMBER DEAD

17. NUMBER ALIVE

18. BY *(Signature)*

19. TITLE

20. DATE

(Replaces VS Form 18-20, which is now obsolete, and APHIS Form 7020 (10-90) and (4-93) which may be used.)