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| 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 number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average .5 hours 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  0579-0160 | |
| UNITED STATES DEPARTMENT OF AGRICULTURE  ANIMAL AND PLANT HEALTH INSPECTION SERVICE  VETERINARY SERVICES | | | | | | | | | OWNER/SHIPPER CERTIFICATE  FITNESS TO TRAVEL TO A SLAUGHTER FACILITY  (*CONTINUATION SHEET*)(*Please type or print in ink*) | | | | | | | | | | |
|  | TAG  PREFIX | TAG  NO. | COLOR DESCRIPTION | | | | | | BREED/TYPE | | | | | SEX | | | BRANDS Tattoos, etc. | | REMARKS Include precondition |
| Bay | Grey | Black | Pinto | Chest-  nut | Other | TB | QT | Draft | Pony | Other | Mare | Stall  ion | Geld  -ing |
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| SIGNATURE OF OWNER/SHIPPER (*I certify that the information contained in this form is true and correct to the best of my knowledge.*) | | | | | | | | | | | | | | | | | | | |

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