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OMB Approved
0579-0047 and 0579-0185

STATE _____ **ALL INCOMPLETE RECORDS WILL BE RETURNED FOR COMPLETION**

COUNTY _____ CODE _____ **COOPERATIVE STATE-FEDERAL BRUCELLOSIS ERADICATION PROGRAM**

BRUCELLOSIS TEST RECORD

HERD NUMBER _____ HERD OWNER LAST FIRST INITIAL _____ PREVIOUS TEST DATE _____ VET CODE _____ TOTAL _____ REA _____ SUS _____

PREMISES ID NO. _____ ROUTE STREET ROAD _____ CERTIFICATION FOR PAYMENT

POST OFFICE _____ STATE _____ ZIP CODE _____ FEDERAL EMPLOYEE FEE BASIS (Federal) STATE COUNTY PRIVATE (Owner's expense)

REASON FOR TEST INITIAL RETEST _____ GPS COORDINATES _____

Slaughter Rea 1 | Hd. Cert/Validation 6 | **COMPLETE HERD TEST OF ALL ELIGIBLE ANIMALS** YES NO NO. IN HERD _____ SUMMARY _____

Lvst. Mkt. Rea 2 | Post Move Quar. Test 7 | DAIRY BEEF MIXED _____ NEG-ATIVE _____

Susp. Ring Test 3 | Area Test 8 | SWINE OTHER (Specify below) _____ SUS-PECT _____

Diagnotic 4 | Epidemiology 9 | **KIND OF HERD** DAIRY BEEF MIXED _____ REAC-TOR _____

Pvt. Sate 5 | Other (Specify below) 10 | _____

REMARKS _____ LABORATORY PLACE _____ DATE _____ TOTAL _____

REACTORS TAGGED AND BRANDED DATE: _____ SIGNATURE: _____ AGREE CODE _____

DATE LISTED _____ BY: _____ LABORATORY RESULTS _____ TEST IN-TERP _____ REMARKS AND ADDITIONAL INFORMATION _____ REACTOR TAG NUMBER _____

TUBE NO.	2	RECORD ALL IDENTIFICATION NUMBERS(S)	VACC TATTOO	AGE	BREED	SEX	FLD T	RAP	FPA	CARD	BAPA	CF	TEST IN-TERP	REMARKS AND ADDITIONAL INFORMATION	REACTOR TAG NUMBER
	1														
	2														
	3														
	4														
	5														
	6														
	7														
	8														
	9														
	10														
	11														
	12														
	13														
	14														
	15														

RT - Retag
NA - Natural Addition
PA - Purchased Addition
AB - Aborter

Record ALL Eartag(s) and Tattoo(s)

Record ALL Legible Characters

FIELD TEST CODE
N - Negative
P - Positive

TEST INTERPRETATION
N - Negative Classified by: _____
S - Suspect
R - Reactor date Classified: _____

TEST AUTHORIZATION EXPIRES