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OMB Approved  
0579-0020, 0101, 0156,  
and 0432

This certificate is authorized by law (21 U.S.C. 112); while you are not required to respond, no health certificate can be validated unless the data requested is provided.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES <b>UNITED STATES ORIGIN HEALTH CERTIFICATE</b> <i>(This document does not replace the Certificate of Inspection of Export Animals, VS Form 17-27)</i>	1. CONSIGNOR'S NAME <i>(Last name, First name, Middle initial, or Business name)</i>	2. CERTIFICATE NUMBER	3. PAGE NUMBER  1 OF
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4. DATE ISSUED	5. UNITED STATES PORT OF EMBARKATION <i>(City and State)</i>	6. STATE CODE	7. CONSIGNOR'S STREET ADDRESS <i>(Mailing Address)</i>	8. CONSIGNOR'S CITY <i>(or Town)</i>
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9. SEMEN <i>("X" if yes)</i> <input type="checkbox"/>	10. NO. DOSES OF SEMEN	11. TRANSPORTATION CLASS <input type="checkbox"/> 1 - Rail <input type="checkbox"/> 3 - Air <input type="checkbox"/> 2 - Truck <input type="checkbox"/> 4 - Ocean	12. CONSIGNOR'S STATE	13. STATE CODE	14. ZIP CODE
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16. CONSIGNEE'S NAME AND STREET ADDRESS <i>(Mailing Address)</i>		DESTINATION COUNTRY	ENTER CODE
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15. SPECIES <i>("X" one - use VS Form 17-6 for Poultry)</i> <input type="checkbox"/> 01 BOVINE <input type="checkbox"/> 02 PORCINE <input type="checkbox"/> 03 OVINE <input type="checkbox"/> 04 CAPRINE <input type="checkbox"/> 05 EQUINE <input type="checkbox"/> 08 OTHER WILDLIFE - MAMMAL  <input type="checkbox"/> 09 OTHER <i>(Specify)</i>		Negative Tuberculin Reading <input type="checkbox"/> 48 HRS <input type="checkbox"/> 72 HRS	BRUCELLOSIS BLOOD SAMPLE COLLECTED	NEGATIVE RESULTS OF OTHER TESTS		
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If more lines are needed below - use VS Form 17-140A		MODIFIED ACCREDITED AREA (TB)						CERTIFIED BRUCELLOSIS FREE AREA						DISEASE						
17. FARM ORIGIN Owner's Name <i>(Last Name, Two Initials, or Business Name)</i> Owner's Street Address, Owner's City/Town, State Code. <i>(FIPS Code on reverse)</i> and ZIP Code		18. INDIVIDUAL IDENTIFICATION <i>(Instructions for columns A, B, C, and D on reverse)</i>										DISEASE			DISEASE			DISEASE		
		ID NUMBER OR DESCRIPTION A	AGE B	SEX C	BREED D	√ E	DATE F	√ G	DATE H	VAC I	1/25 J	1/50 K	1/100 L	DATE M	DATE N	DATE O				

**VALID ONLY IF USDA VETERINARY SEAL APPEARS HERE** **CERTIFICATION BY ISSUING VETERINARIAN**

This is to certify that the animals identified above were inspected by me on this date and found to be free from evidence of communicable diseases and insofar as can be determined exposure thereto; the premises of origin are not under Federal or State quarantine because of animal disease; the animals were all negative to the tests shown on the dates indicated. Arrangements have been made for the animals to be handled in a transporting vehicle that has been cleaned and disinfected since last used for livestock and for movement to the port of embarkation without exposure to other animals en route, except those meeting these health requirements. The shipment must be accompanied to the port of export with this certificate.

23. Signature of Endorsing Federal Veterinarian	19. DATE ENDORSED	20. NAME OF ISSUING VETERINARIAN <i>(Last Name, First Name, Middle Initial, - please print)</i>	21. STATUS <input type="checkbox"/> 1 State <input type="checkbox"/> 2 Federal <input type="checkbox"/> 3 Accredited	22. TOTAL NUMBERS OF ANIMALS <i>(Certified for export or donated semen) (Include numbers from all attached VS Forms 17-140A)</i>
	24. NAME OF ENDORSING FEDERAL VETERINARIAN <i>(Type, Print, or Stamp)</i>		25. SIGNATURE OF ISSUING VETERINARIAN	

**INSTRUCTIONS FOR COMPLETING VS FORM 17-140, UNITED STATES ORIGIN HEALTH CERTIFICATE  
AND  
VS FORM 17-140A, CONTINUATION SHEET FOR UNITED STATES ORIGIN HEALTH CERTIFICATE**

Use a separate form for each Species. If additional lines are needed, use as many VS Forms 17-140A and B, Continuation Sheet for United States Origin Health Certificate, as needed. If more copies of this certificate are needed, duplicated copies may be made after endorsement, using any copy except the original. No additions, changes or deletions will be made on this certificate unless initialed by the issuing, endorsing, or port veterinarian. (A double ruled line will be used to delete animals not being shipped.)

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| <p>1. Self-explanatory.</p> <p>2. <b>CERTIFICATE NO.</b> - The Imprinted certificate no. on the Certificate shall not be altered or crossed out, and all copies covering the same Species shall carry the same unaltered certificate no. Insert this no. on all VS Forms 17-140A used.</p> <p>3. <b>PAGE NO.</b> - Show total number pages in the shipment on each sheet, (i.e., a shipment which would use one VS Form 17-140 and two VS Form 17-140A would be numbered: "Page 1 of 3; Page 2 of 3; and Page 3 of 3).</p> <p>4. <b>DATE ISSUED</b> - The date the veterinary inspection is completed.</p> <p>5. <b>U.S. PORT OF EMBARKATION</b> - The point of loading for export</p> | <p>6. <b>STATE CODE</b> - See FIPS state codes below.</p> <p>7. Self-explanatory.</p> <p>8. Self-explanatory.</p> <p>9. <b>SEMEN</b> - Check If Semen, but be certain to give the Species in Item 15.</p> <p>10. Self-explanatory.</p> <p>11. Self-explanatory.</p> <p>12. Self-explanatory</p> <p>13. <b>STATE CODE</b> - See FIPS state codes below</p> <p>14. Self-explanatory</p> | <p>15. <b>SPECIES</b> - (Check or Specify) - A separate certificate must be used for each species.</p> <p>16. Enter name and address of consignee and FIPS country code.</p> <p>17. Self-explanatory. (FIPS State Codes Below)</p> <p>18. <b>A - ID NO. OR DESCRIPTION</b> - Show the complete ear tag or tattoo no.</p> <p><b>B - AGE</b> - Age measured in months.</p> <p><b>C - SEX</b> - M-Male F-Female N-Neuter</p> |
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**18D - BREEDS**

BOVINE					PORCINE			CAPRINE	
AN - Aberdeen Angus	CN - Canadienne	GA - Galloway (beef)	LR - Lincoln Red	RN - Romagnola	YO - Yorkshire	PC - Poland China	TM - Tamworth	AL - Alpine	
AB - Abundance	CH - Charolais	GD - Galloway (dairy)	MA - Maine-Anjou	RO - Rotbunte	LA - Landrace	BK - Berkshire	WS - Wessex Saddleback	AG - Angora	
AF - Alfokander	CA - Chianina	GS - Gascone	MR - Marchigiana	AS - Salers	HA - Hampshire	SO - Spotted	LW - Large White (British)	LN - La Mancha	
AY - Ayahire	DB - Danish Black and White	GV - Gelbvieh	ME - Maremmana	SG - Santa Gertrudis	DU - Durec	CW - Chester White	LB - Large Black (British)	NU - Nubian	
BA - Barzona	DJ - Danish Jersey	GR - Groninger	MI - Meuse-Rhine-Ijessel	MS - Shorthorn (milking)	LC - Lacombe	PE - Pietrain		TO - Toggenburg	
BE - Beefalo	RW - Danish Red and White	GU - Guernsey	MO - Montbellard	SS - Shorthorn (beef-Scotch)	<b>OVINE</b>				RA - Rambouillet
BF - Beef Friesian	HH - Hereford (horned)	HC - Hays Converter	MG - Murray Gray	SP - MS - Shorthorn (polled)					BC - Border Cheviot
BM - Beef Master	HP - Hereford (polled)	HM - Hereford (horned)	NM - Normandle	IS - Shorthorn (Iliawarra)	CR - Corriedale	MT - Montadale		SB - Scottish Blackface	
BB - Belgium Blue	DR - Dexter	SH - Highland (Scotch Highland)	NR - Norwegian Red	SM - Simmental	DO - Dorset	NC - N. Country Cheviot		SR - Shropshire	
BG - Belter Galloway	FP - East Flemish Red Pied	HO - Holstein	PA - Parthenais	DS - South Devon	FN - Finnish Landrace	OX - Oxford		ST - Southdown	
BD - Blonde D'Aquitaine	ER - Eringer	HY - Hybrid (Alberta Hybrid)	PI - Pinzgauer	SX - Sussex	HA - Hampshire			SU - Suffolk	
BO - Bradford	FA - Flamand	JE - Jersey	RA - Ranger	TA - Tarentaise	<b>EQUINE</b>				SI - Shire
BR - Brahman	FL - Fleckvieh	KB - Kobe (Wagyu)	AR - Red Angus	TG - Tasmanian Grey					AS - American Saddlebred
BR - Brahmental	FR - Fribourg	LU - Luining	RB - Red Brangus	TL - Texas Longhorn	AP - Appalosa	APL - Palomino		SF - Suffolk Punch	
BN - Brangus	FB - Friesian (Belgium)	LM - Limousin	RD - Red Dane (Red Danish, Danish Red)	WB - Welsh Black	BL - Belgian	PE - Percheron		TW - Tennessee Walking	
SB - Brown Swiss (beef)	DF - Friesian (Dutch)		WW - Red Holstein	WF - West Flemish Red	CL - Clydesdale	PN - Pinto		TH - Thoroughbred	
BS - Brown Swiss (dairy)			RP - Red Poll	XX - Crossbreds	HA - Hackney (Horse)	OH - Quarter Horse		WE - Welsh	
CP - Campine Red Pied					HK - Hackney (pony)	SE - Shetland			

**COLUMNS E-O**

E, F, G, H, - Self-Explanatory	I - VAC - Use "OV" official vaccinates, or vaccination date when required by country or destination.	J, K, L - Show Negative In highest Titer required.	M, N, O, - Self-Explanatory
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**FIPS STATE CODES (Items 6, 13, and 17)**

01 - Alabama	08 - Colorado	13 - Georgia	19 - Iowa	24 - Maryland	29 - Missouri	34 - New Jersey	39 - Ohio	44 - Rhode Island	49 - Utah	54 - West Virginia
02 - Alaska	09 - Connecticut	15 - Hawaii	20 - Kansas	25 - Massachusetts	30 - Montana	35 - New Mexico	40 - Oklahoma	45 - South Carolina	50 - Vermont	55 - Wisconsin
03 - Arizona	10 - Delaware	16 - Idaho	21 - Kentucky	26 - Michigan	31 - Nebraska	36 - New York	41 - Oregon	46 - South Dakota	51 - Virginia	56 - Wyoming
04 - Arkansas	11 - Dist. of Columbia	17 - Illinois	22 - Louisiana	27 - Minnesota	32 - Nevada	37 - North Carolina	42 - Pennsylvania	47 - Tennessee	52 - Virgin Island	
06 - California	12 - Florida	18 - Indiana	23 - Maine	28 - Mississippi	33 - New Hampshire	38 - North Dakota	43 - Puerto Rico	48 - Texas	53 - Washington	