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 0579-0007, 0579-0065, 0579-0101 0579-0146, 0579-0192, and XXXX. The time required to complete this information collection is estimated to average between .26 and 40 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**
0579-0007, 0579-0065, 0579-0101, 0579-0146, 0579-0192, and XXXX

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

# PROCEEDS FROM ANIMALS/ANIMAL PRODUCTS/MATERIALS SOLD FOR SALVAGE

No further monies or other benefits will be paid out under this program unless this report is completed and filed as required by existing regulations (9 CFR 49-199).

| DESCRIPTION OF ANIMALS OR ANIMAL PRODUCTS OR MATERIALS (*Species, Type, ID*) | WEIGHT/UNIT | PRICE PER UNIT | GROSS RECEIPTS | EXPENSES 1/ | NET SALVAGE PAID TO OWNER/AGENT OF EACH ANIMAL/ANIMAL PRODUCTS/MATERIALS |
|---|---|---|---|---|---|
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| TOTAL | | | $ | $ | $ |

**SOLD TO** *(Name of Establishment)*

## CERTIFICATION

☐ **Purchaser** ☐ **Seller**

**I certify that the sum(s) shown above which has been paid represents the net salvage from said animals/animal products/materials.**

| | | |
|---|---|---|
| **PAID TO** *(Owner or Agent)* | | **DATE OF TRANSACTION** |
| **NAME OF PURCHASER OR SELLER** | **PREMISE ID NUMBER** | **DUNS NUMBER** |
| **By** *(Signature)* | **TITLE** | **DATE** |

1/ Show the total expenses of marketing, including charges for transportation, feeding, yardage, slaughter, and commission for selling agents, when applicable.