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 0579-0332. 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 complete the personal region of the control regions.

OMB APPROVED 0579-0332 Exp. Date XX/XXXX

comp	leting and revie	ewing the	collection	of informati	ion.												Exp. Dat	IE XXXXXX		
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES								OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY (Please type or print in ink)												
TIME HORSES LOADED ON CONVEYANCE DATE										CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE										
VEHICLE LICENSE NUMBER AND DRIVER NAME										NAME OF AUCTION/MARKET										
CON	ISIGNOR (O	WNER/S	SHIPPER	?) NAME						CONSIGNEE (RECEIVER/DESTINATION) NAME										
OTD		-00								STREET ADDRESS										
SIK	EET ADDRE	55																		
CITY	/, STATE, AN	ND ZIP C	ODE							CITY, STATE, AND ZIP CODE										
ARE	A CODE AN	D TELEF	HONE 1	NUMBER						AREA CODE AND TELEPHONE NUMBER										
CHE	L CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE																			
	Pregnant ma									es are able				nbs.						
П	Foals are old	der than	6 months	s of age.				Г	기 Hors	es are not	s are not blind in both eyes. Horses are able to walk unas						to walk unas	esisted		
		COLOR DESCRIPTION							1,10.0.		REED/TYP		J.		SEX	1	BRANDS	REMARKS		
1.	TAG PREFIX	TAG NO.	Bay	Grey	Blk.	Pinto	Chest -nut	Other	ТВ	QT	Draft	Pony	Other	Mare	Stall ion	Geld- ing	Tattoos, etc	include existing conditions		
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1141141	IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.													EST.						
SIGN	IATURE											D	DATE							
												Т	TIME							
THE	REBY AUTHOF CFIA OR DGIF IINAL OFFENS	TO THE	USDA. FA	ALSIFICAT	TION OF TI	HIS FORM	M OR KNO	WINGLY U	USING A	FALSIFIED	FORM IS	i A	DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)							
MOR	E THAN 5 YEA NATURE OF	OWNER	BOTH (16 L R/SHIPPE	U.S.C. SEC	CTION 100	01).							EST.							
lO un	e best of my	Kriowieu	ge.)									D	DATE							
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