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**OMB APPROVED**  
0579-0040  
EXP: XX/XXXX

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

**EQUINE IMPORT TESTING SUBMISSION**  
**(continuation sheet to VS Form 17-31)**

**\*\*\*THIS FORM MUST BE USED IN CONJUNCTION WITH VS FORM 17-31. DO NOT SUBMIT ALONE\*\*\***

15. SAMPLE DATA

PAGE:    OF

SAMPLE NUMBER	IDENTIFICATION 1 <i>(registered name/barn name)</i>	IDENTIFICATION 2 <i>(RFID#, tattoo, tags, markings, other)</i>	ANIMAL COUNTRY OF ORIGIN CODE	AGE	SEX	BREED	COLOR
A	B	C	D	E	F	G	H