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 these information collections are 0579-0007, 0579-0047, 0579-0065, 0579-0101, 0579-0146, and 0579-0189. The time required to complete this information
collection is estimated to average between .16 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, 0579-0047, 0579-0065, 0579-0101, 0579-0146, 0579-0189, 0579-0192

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

APPRAISAL AND INDEMNITY CLAIM

ANIMALS DESTROYED MATERIALS DESTROYED SERVICES PROVIDED

This information is required to be completed for the appraisal of animals, materials, and/or services for which indemnity is claimed. No monies or other benefits may be paid out unless this report is completed and filed as authorized.

			SECTION		ANT INFORMATI	ON						
1. DISEASE NAME	6. PREMISES IDENTIFICATION	NUMBER				11. CLAIMANT(S) LEGAL NAME (must match DUNS/SAMS information in Item 10)						
2. HERD/FLOCK/GROUP IDENTIFICATION	7. PREMISES WHERE APPRAIS	PREMISES WHERE APPRAISAL WAS MADE (if different from Item 12; must match Item 6) 12. CLAIMANT MAILING ADDRESS (number and street, or RFD)										
3. HERD/FLOCK/GROUP DISEASE STATUS	8. PREMISES ADDRESS (numbe	er and street, or RFL))			13a. CITY	13b. COUNTY	13c. STATE	13d. ZIP CODE			
4. DATE(S) ANIMALS/MATERIALS DESTROYED AND/OR SERVICES PROVIDED	9a. CITY	9b. COUNTY		9c. STATE	9d. ZIP CODE	14. CLAIMANT IS						
5. DATE OF CLEANING AND DISINFECTING	10a. DUNS NUMBERS		10b. SAMS RE	GISTERED		15. IF JOINT OWNERS	HIP, GIVE FULL NAMES OF ALL OW	NERS (if same as Item	11, so state)			
		OFOTION				VOEDT AVUAN						

SECTION II - APPRAISAL FOR ALL SPECIES EXCEPT AVIAN

A. ANIMALS APPRAISED								B. APPRAIS	AL		C. TOTAL CLAIN	D. AMOUNT DUE FROM		
L I N E	16. DESCRIPTION/IDENTIFICATION OF ANIMALS	17. SPECIES			BREED	21. RELATED PAGE NUMBERS FOR VS FORM 1-23A	UNIT (head, LB,	23. NUMBER OF UNITS/WEIGHT	24a. VALUE PER UNIT	25. TOTAL APPRAISAL	26. SALVAGE (VS Form 1-24)	27. DIFFERENCE	28. U.S. GOVT AGENCY	29. OTHER
1									\$	\$	\$	\$	\$	\$
2									\$	\$	\$	\$	\$	\$
3									\$	\$	\$	\$	\$	\$
4									\$	\$	\$	\$	\$	\$
5									\$	\$	\$	\$	\$	\$
						TOTALS or payment)			\$	\$	\$	\$	\$	

SECTION III - APPRAISAL FOR AVIAN SPECIES

A. BIRDS/EGGS APPRAISED								B. APPRAIS	SAL	(C. TOTAL CLAIN	D. AMOUNT DUE FROM		
L I N E	30. DESCRIPTION/IDENTIFICATION OF ANIMALS (barn and flock numbers)	31. AVIAN TYPE	32. AGE		34. DAYS IN 2ND LAY	35. RELATED PAGE NUMBERS FOR VS FORM 1-23A	36. UNIT (head or egg)	37. NUMBER OF UNITS/WEIGHT	38a. VALUE PER UNIT	39. TOTAL APPRAISAL	40. SALVAGE (VS Form 1-24)	41. DIFFERENCE	42. U.S. GOVT AGENCY	43. OTHER
1									\$	\$	\$	\$	\$	\$
2									\$	\$	\$	\$	\$	\$
3									\$	\$	\$	\$	\$	\$
4									\$	\$	\$	\$	\$	\$
5									\$	\$	\$	\$	\$	\$
							TOTALS			\$	\$	\$	\$	\$

N. PROCESSED JPPARED B. APPRIASL C. TOTAL CLAW L L UIII Control (L) (UIIII (C) (UIIIII (C) (UIIIII (C) (UIIIII (C) (UIIIII (C) (UIIIII (C) (UIIIII (C) (UIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		SECTION IV - APPRAISAL FOR PATHOGEN ELIMINATION												
L DECEMPTION OF PATHOGEN UNIT INJURCE NO PATHON DATE DATE <t< td=""><td></td><td>A. PROCESSED APPRAISED</td><td></td><td>B. APPRAISA</td><td>L</td><td></td><td colspan="8"></td></t<>		A. PROCESSED APPRAISED		B. APPRAISA	L									
2		L DESCRIPTION OF PATHOGEN UNIT NUMBER OF I ELIMINATION PROCESS (gallons, hours, UNITS, HOUR N square foot, etc.) OR WEIGHT		NUMBER OF UNITS, HOURS	PRICE PER UN	IT TOTAL	DATE REQUIREM MET FC FIRST	E MENTS OR T		DATE REQUIREMENTS MET FOR SECOND			NOTE	s
a	1				\$	\$			\$		\$			
4 5 5 5 5 5 3 GRAD DECREPTION OF MACRINE AND OR SPECIAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 1 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 2 S. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM 3 S. S	2				\$	\$			\$		\$			
s s s s s s s dr. DURCE OF PRICING DATA AND/OS SPECUL, FACTORS AFFECTING (DRAND TOTAL) GRAND TOTAL S S S S dr. DURCES date-for data on the data of the data	3				\$	\$			\$		\$			
An. SCURCE OF PROIND GUAT AND/OR SPECULE FACTORS AFFECTING Gamma POTIALS S S S S PROUND GUAT A MUDOR SPECULE APPRAISED B. APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED C. TOTAL CLAIM A. MATERIALS/SERVICES APPRAISED B. APPRAISAL C. TOTAL CLAIM Image: Control of the second of the secon	4				\$	\$			\$		\$			
PACING (alloch h mit form) Case for Approximately S S Control Action Exercition V - APPRAISAL C. TOTAL CLAIM Sub- Image: Services approximation of the approximation of th	5				\$	\$			\$		\$			
SECTION V - APPRAISAL FOR MATERIALS DESTROYED AND SERVICES PROVIDED A. MATERIALSSPERVICES APPRAISED B. APPRAISAL B. APPRAISAL C. TOTAL CLAM I B. DESCRIPTION OF MATERIALS DESTROYED AND/OR SERVICES Display Display <thdisplay< th=""> Display D</thdisplay<>			SPECIAL FACTORS AFF		GRAND TOTALS (basis for payme	S ent) \$			\$		\$			
L JA ESCRIPTION OF MATERIALS DESTROYED AND/OR SERVICES 65. BADDITIONAL (mapped foot, eds) 66. UNTS, HOURE, SUBTORIAL (NUTS, HOURE, OR WEIGHT 61. PPRCABAL 61. (NUTS, HOURE, SUBTORIAL (NUTS, HOURE, SUBTOR (NUTS, HOURE, SUBTOR (NUTS, HOURE, SUBTOR (NUTS, HOURE, SUBTORIAL														
N DESCRIPTION OF MATERIALS INSPRNED ADDITIONAL INSPRNED UNITS APPRAISAL (% 7 mm ? - 4) OFFERENCE (% 7 mm ? - 4) GRAND TOTAL NOTES 1		A. MATERIALS/SERVICES	APPRAISED		B. APPRAIS	AL			С. ТОТА					
1 Image: Bool Instruction of the second	I N	DESCRIPTION OF MATERIALS DESTROYED AND/OR SERVICES	DESCRIPTION OF MATERIALS ADDITIONAL UNIT DESTROYED AND/OR SERVICES INFORMATION (gallons, hours,				APPRAISAL		SALVAGE					
2 NO S S S S S S 3 NO S S S S S S S 4 NO S<	1					\$	\$		\$	\$	\$			
3 0 0 3 3 3 3 3 4 0 VES \$ <td>2</td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td>\$</td> <td></td> <td>\$</td> <td>\$</td> <td>\$</td> <td></td> <td></td> <td></td>	2					\$	\$		\$	\$	\$			
1 1 0 3 3 3 3 3 3 5 1	3					\$	\$		\$	\$	\$			
5	4					\$	\$		\$	\$	\$			
58b. SOURCE OF PRICING DATA AND/OR SPECIAL FACTORS AFFECTING GRAND TOTALS GRAND TOTALS \$	5					\$	\$		\$	\$	\$			
SECTION VI - CERTIFICATIONS CERTIFICATION AND APPRAISAL CERTIFICATE Certification and or services identified in this claim are motigaged (check and initial one). Yes No Lentify that the animals and/or materials listed above are properly identified and are eligible to indermity and that animals, services, and/or materials is a group are of equal value. If urther certify that tow or an authorized to represent the owner, or an otherwise the claimant, of the animals and/or materials is dentified in this services, and/or materials and/or materials is and reputations and/or materials is a group are of equal value. Is in the certify that tow or an authorized to represent the owner, or an otherwise the claimant, of the animals and/or materials is and/or materials and/or materials is and/or materials is a group are of equal value. Is indee claim and or particular to motify and that animals. Is an on the claim. 70. APPRAISAL METHOD USED 70. APPRAISAL METHOD USED 70. APPRAISAL METHOD USED 70. APPRAISAL METHOD USED 71. NAME, TITLE, AND SIGNATURE OF CLAIMANT OR AUTHORIZED REPRESENTATIVE 71. NAME, TITLE, AND SIGNATURE OF SPECIAL EXPERT APPRAISER 64. NAME AND SIGNATURE OF MORTGAGEE OR AUTHORIZED REPRESENTATIVE 67. Date 71. NAME, TITLE, AND SIGNATURE OF SPECIAL EXPERT APPRAISER 68a. OUTY 68c. STATE 68d. ZIP CODE 73. NAME, TITLE, AND SIGNATURE OF STATE REPRESENTATIVE 76. IF MORTAGED, FEDERAL INDEMNIT	58b. SOURCE OF PRICING DATA AND/OR SPECIAL FACTORS AFFECTING GRAND TOTALS													
OWNER-CLAIMANT MORTGAGOR CERTIFICATION CERTIFICATION AND APPRAISAL CERTIFICATE I certify that the animals, and/or services identified in this claim are mortgaged (<i>check and initial one</i>). Yes I I certify that the animals and/or materials ised above are properly identified are eligible for indemnity and that animals and/or materials ised above are properly identified are eligible for indemnity and that animals and/or materials individiated water and animals and/or materials individiated water appraised raile of animals and/or materials individiated water appraised and/or materials individiated water and regulations. Such and regulations and I hereby express/t To. APPRAISEL AND/OR To. APPRAISEL METHOD USED Value or animals and/or materials individiation and the destruction of said animals and/or materials individiated and animals and/or materials. To. APPRAISEL METHOD USED 64. SIGNATURE OF CLAIMANT OR AUTHORIZED REPRESENTATIVE AS SHOWN IN ITEM 11 65. Date To. NAME, TITLE, AND SIGNATURE OF SOUT APPRAISER/REPRESENTATIVE 68a. MORTGAGEE MAILING ADDRESS Eestification of said animals and/or materials individiated and animals and/or materials individiated and animals and/or materials. To. APRAISEL CERTIFICATION 68b. CITY Eestificatin to monthing and/or materials individiated and in th						SECTION VI -			NS					
I further certify that I own or am authorized to represent the owner, or am otherwise the claimant, of the animals and/or materials identified in this damounts due me in accordance with all applicable laws and regulations governing the payment for the animals and/or materials identified in this daminals and/or materials and/or materials identified in this daminals and/or materials identified in this daminals and/or materials identified in this daminals and/or materials and/or materials identified in this daminals and/or materials and/or materials identified in this daminals and/or materials identified in this daminals and/or materials identified in this daminals and/or materials are appraised as shown on this data. I further agree to the destruction of said animals and/or materials. 64. SIGNATURE OF CLAIMANT OR AUTHORIZED REPRESENTATIVE AS SHOWN IN ITEM 11 65. Date 71. NAME, TITLE, AND SIGNATURE OF GOV'T APPRAISER APPRAISER 68a. MORTGAGEE MAILING ADDRESS		o	WNER-CLAIMANT MOR	TGAGOR CERTIF						CERTIFICA		PRAISAL	CERTIFICATE	
Imaterials identified in this claim. If utily understand my right to compensation in accordance with applicable laws and regulations and hereby sepressly 10. APPRAISAL METHOD USED Waive any claim I may have to compensation for animals and/or materials identified in this claim above the value at which such animals and/or materials identified in this claim above the value at which such animals and/or materials. 10. APPRAISAL METHOD USED 64. SIGNATURE OF CLAIMANT OR AUTHORIZED REPRESENTATIVE AS SHOWN IN ITEM 11 65. Date 11. NAME, TITLE, AND SIGNATURE OF SPECIAL EXPERT APPRAISER 68a. MORTGAGEE MAILING ADDRESS 67. Date 72. NAME, TITLE, AND SIGNATURE OF SPECIAL EXPERT APPRAISER 68b. CITY 68c. STATE 68d. ZIP CODE 73. NAME, TITLE, AND SIGNATURE OF STATE REPRESENTATIVE 76. IF MORTAGED, FEDERAL INDEMNITY PAYMENT WILL BE DRAWN IN FAVOR OF MORTGAGOR AND SHOULD BE MAILED TO: 74. STATE AGENCY 75. DATE 670. JUNCE-MORTGAGOR (<i>Item 11</i>) MORTGAGEE (<i>Item 11</i>) MORTGAGEE (<i>Item 11</i>) 80. DATE 81. PAGE 670. FORS 77. FOR \$ 78. ALLOTMENT NUMBER 79. BY NAME, TITLE, AND SIGNATURE OF APPROVAL AUTHORITY 80. DATE 81. PAGE	1.6	ther eartify that I own or am outborized to	correspont the summer or on	o othorwigo the clai	mont of the onimal	, a and/or motorials ident	ified in this Se	ervices, a			e appraised ind	lividually ur	nless all animals or materia	
66. NAME AND SIGNATURE OF MORTGAGEE OR AUTHORIZED REPRESENTATIVE 67. Date 72. NAME, TITLE, AND SIGNATURE OF SPECIAL EXPERT APPRAISER 68a. MORTGAGEE MAILING ADDRESS STATE CERTIFICATION 68b. CITY 68c. STATE 68d. ZIP CODE 73. NAME, TITLE, AND SIGNATURE OF STATE REPRESENTATIVE 76. IF MORTAGED, FEDERAL INDEMNITY PAYMENT WILL BE DRAWN IN FAVOR OF MORTGAGOR AND SHOULD BE MAILED TO: 74. STATE AGENCY 75. DATE 0 WNER-MORTGAGOR (<i>Item 11</i>) Immonstrate of the state	that the appraised value of animals and/or materials shown herein is in accordance with alphicable laws and regulations. In fereby agree los. DATE ANIMALS/MATERIALS APPRAISED AND/OR 70. APPRAISED AN													
68a. MORTGAGEE MAILING ADDRESS STATE CERTIFICATION 68a. MORTGAGEE MAILING ADDRESS I certify the amount in Item 29 as due from the State Agency is correct and each such amount has been or will be paid to the Claimant. 68b. CITY 68c. STATE 68d. ZIP CODE 73. NAME, TITLE, AND SIGNATURE OF STATE REPRESENTATIVE 76. IF MORTAGED, FEDERAL INDEMNITY PAYMENT WILL BE DRAWN IN FAVOR OF MORTGAGOR AND SHOULD BE MAILED TO: 74. STATE AGENCY 75. DATE I OWNER-MORTGAGOR (Item 11) I MORTGAGEE (Item 11) I MORTGAGEE (Item 11) 80. DATE 81. PAGE APPROVED 77. FOR \$ 78. ALLOTMENT NUMBER 79. BY NAME, TITLE, AND SIGNATURE OF APPROVAL AUTHORITY 80. DATE 81. PAGE														
I certify the amount in Item 29 as due from the State Agency is correct and each such amount has been or will be paid to the Claimant. 68b. CITY 68c. STATE 68d. ZIP CODE 73. NAME, TITLE, AND SIGNATURE OF STATE REPRESENTATIVE 76. IF MORTAGED, FEDERAL INDEMNITY PAYMENT WILL BE DRAWN IN FAVOR OF MORTGAGOR AND SHOULD BE MAILED TO: 74. STATE AGENCY 75. DATE OWNER-MORTGAGOR (Item 11) Image: Mortgage of the mail of the mai	66.	NAME AND SIGNATURE OF MORTGAG	72	72. NAME, TITLE, AND SIGNATURE OF SPECIAL EXPERT APPRAISER										
68b. CITY 68c. STATE 68d. ZIP CODE 73. NAME, TITLE, AND SIGNATURE OF STATE REPRESENTATIVE 76. IF MORTAGED, FEDERAL INDEMNITY PAYMENT WILL BE DRAWN IN FAVOR OF MORTGAGOR AND SHOULD BE MAILED TO: 74. STATE AGENCY 75. DATE I OWNER-MORTGAGOR (Item 11) I MORTGAGEE (Item 11) MORTGAGEE (Item 11) 79. BY NAME, TITLE, AND SIGNATURE OF APPROVAL AUTHORITY 80. DATE 81. PAGE APPROVED 77. FOR \$ 78. ALLOTMENT NUMBER 79. BY NAME, TITLE, AND SIGNATURE OF APPROVAL AUTHORITY 80. DATE 81. PAGE	I certify the amount in Item 29 as due from the State Agency is correct and each such amou										een or will be paid to the			
Image: OWNER-MORTGAGOR (Item 11) Image: Mortgage (Item 11) APPROVED 77. FOR \$ 78. ALLOTMENT NUMBER 79. BY NAME, TITLE, AND SIGNATURE OF APPROVAL AUTHORITY 80. DATE 81. PAGE OF 0F 0F 0F														
APPROVED 77. FOR \$ 78. ALLOTMENT NUMBER 79. BY NAME, TITLE, AND SIGNATURE OF APPROVAL AUTHORITY 80. DATE 81. PAGE OF OF OF OF OF					MORTGAGOR ANI	D SHOULD BE MAILED	D TO: 74	4. STAT	E AGENCY			75.	DATE	
		77. FOR \$,	NAME, TITLE, AND	D SIGNATURE OF APF	PROVAL AUT	HORITY	,			80.	DATE	
	2//9	FORM 1-23			Previous edit	tions may be used								UF