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 0579-0047, 0579-0065, 0579-0101, 0579-0127, 0579-0146, 0579-0338, and 0579-0393. The time required to complete this information collection is estimated to average between 10 minutes and 2 hours, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.											
UNITED STATE ANIMAL AND PL VE		TH INS	PECTION		PERMIT FOR MOVEMENT OF ANIMALS CONTINUATION SHEET USE A SEPARATE FORM FOR EACH SPECIES						PAGE OF
1. NAME AND ADDRESS OF SHIPPER OR COSIGNOR (include Zip Code)						OF VS Form 1-27					
						3. MOVED FROM (Nam	e and locatio	on of prem	ise if other than	item 1)	
2. CONSIGNEE (Desti	nation Name ar	nd Address	s include Zip C	ode)		4. NAME AND ADDRES	SS OF OW	NER AT	TIME COND	ITION DIAGNOSE	ED
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		ANIMALS	TO BE MOVED								
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