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 0579-0040, 0579-0090, and 0579-XXXX. The time required to complete this information collection is estimated to average .333 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 0579-0040, 0579-0090, and 0579-0485

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES					CONTINUATION SHEET FOR SPECIMEN SUBMI			PAGE	PAGE: OF	
INSTRUCTIONS	S: Use this for	m only as a continu	uation of information	on VS Fo	rm 10-4	. See instructions for	r completing VS Form 10-4.			
3. NAME OF OWNER/BROKER					ner)	15. REFERRAL N	UMBER			
OWNER CITY OWNER STATE/COUNTRY										
	21. IDEN	TIFICATION (See	e instructions)				IDENTIFICATION			
Sample ID		Animal ID	Breed	Age	Sex	Sample ID		eed	Age	Sex
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INSTRUCTIONS FOR VS FORM 10-4A

PAGE

Enter the number for this page out of the total number of pages submitted (e.g., 2 of 3).

NAME OF OWNER/BROKER Enter the complete name of the animal owner from VS Form 10-4, block 3.

REFERRAL NUMBER Enter the referral number from VS Form 10-4, block 15.

IDENTIFICATION

Continue the specimen numbering sequence started on VS 10-4, block 21. Enter the National Animal ID, breed, age, and sex of each animal sampled. If more than 48 specimens are submitted, use additional VS Form 10-4A as required. Please limit to <250 specimens per VS Form 10-4.