

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE VETERINARY SERVICES			CERTIFICATION OF INSPECTION OF EXPORT ANIMALS			1. EXPORT NO.
STATES (<i>FIPS Codes</i>) – ENTER IN ITEMS 5 AND 14			25 - Massachusetts	33 – New Hampshire	41 – Oregon	49 – Utah
01 – Alabama	10 – Delaware	18 – Indiana	26 – Michigan	34 – New Jersey	42 – Pennsylvania	50 – Vermont
02 – Alaska	11 – District of Columbia	19 – Iowa	27 – Minnesota	35 – New Mexico	43 – Puerto Rico	51 – Virginia
04 – Arizona	12 – Florida	20 – Kansas	28 – Mississippi	36 – New York	44 – Rhode Island	52 – Virgin Island
05 – Arkansas	13 – Georgia	21 – Kentucky	29 – Missouri	37 – North Carolina	45 – South Carolina	53 – Washington
06 – California	15 – Hawaii	22 – Louisiana	30 – Montana	38 – North Dakota	46 – South Dakota	54 – West Virginia
08 – Colorado	16 – Idaho	23 – Maine	31 – Nebraska	39 – Ohio	47 – Tennessee	55 – Wisconsin
09 – Connecticut	17 – Illinois	24 – Maryland	32 – Nevada	40 – Oklahoma	48 – Texas	56 - Wyoming
2. CONSIGNOR'S NAME (<i>Last name, first name, middle initial or business name</i>)						
3. CONSIGNOR'S STREET ADDRESS (<i>Mailing address</i>)						
4. CONSIGNOR'S CITY/TOWN			5. STATE CODE		6. ZIP CODE	
7. CONSIGNEE'S NAME (<i>Last name, first name, middle initial or business name – must be identical to name on accompanying U.S. Origin Health Certificate</i>)						
8. CONSIGNEE'S STREET ADDRESS						
9. CONSIGNEE'S CITY/TOWN						
10. NAME OF COUNTRY (<i>Print or type</i>)					11. ENTER CODE	
SPECIES CODES (<i>Enter codes in item 12A</i>)					12. ANIMALS CERTIFIED FOR EXPORT	
01 Bovine	03 Ovine	05 Equine	09 Other		SPECIES A	NO. OF ANIMALS B
02 Porcine	04 Caprine	08 Other Wildlife - Mammals				
13. PORT OF EMBARKATION (<i>City</i>)						
14. STATE OF EMBARKATION (<i>Name</i>)				15. STATE CODE		
16. Transportation Class		17. CARRIER AT PORT OF EMBARKATION (<i>Name of Company or Vessel</i>)		18. DATE OF EXPORT (<i>Mo. Da. Yr.</i>)		
1-Rail	3-Air					
2-Truck	4-Ocean					
19. NAME OF PORT USDA, APHIS, VETERINARY MEDICAL OFFICER (<i>Last name, first name, middle initial, please print</i>)						
I certify that on the date below, I have inspected the listed animals prior to exportation; have found no clinical evidence of communicable diseases regulated by APHIS; the animals, as far as can be determined, are fit for travel, and otherwise meet all other applicable provisions of 9 CFR 91, as amended.						
20. SIGNATURE OF USDA, APHIS VETERINARY MEDICAL OFFICER AT PORT OF EMBARKATION (<i>Not valid unless signed</i>)					21. DATE ISSUED (<i>Mo. Da. Yr.</i>)	

PAPERWORK REDUCTION ACT DISCLOSURE